

EVERYDAY IS A NEW OPPORTUNITY TO LIVE UNITED

P.O. Box 586 • Panama City, FL 32402 • 850-785-7521

**United Way
of Northwest Florida**



www.UnitedWayNWFL.org

My Contact Information:

Section 1

IMPORTANT INSTRUCTIONS: It is very important that you fill out sections 1, 2, and 3 completely. If you choose not to fill out section 3 your pledge will go directly to UWNWFL. Note: County designation takes precedence over agency code if the two conflict.

First Name	M.I.	Last Name	Suffix
_____	_____	_____	_____

Home Address _____

City	State	Zip	Employer (name of school and employee ID#, if applicable)
_____	_____	_____	_____

Email	Phone #	<input type="checkbox"/> I prefer my gift remain anonymous.
_____	_____	

Personal Work Personal Work

I will give through payroll deduction

Amount deducted per pay period **X** $\frac{\text{Circle One: } 12 / 24 / 26 / 52 \text{ or other}}{\text{\# of pay periods per year}} = \$ \underline{\hspace{2cm}}$

I'm enclosing my gift now Cash Check

*Checks will be cashed within 30 days of the workplace campaign envelopes being submitted to the United Way office

Check # _____ Check Date _____

Please make payable to United Way of Northwest Florida

\$ _____

Credit Card (Complete billing address REQUIRED)

MC Visa AmEx Discover

_____ Credit Card Number

_____ Exp. Date

_____ CVN

Charge My Card:

Once
 Monthly

\$ _____

Minimum \$10 donation per transaction

OR I submitted my gift online a www.UnitedWayNWFL.org

X

Signature Required _____

Date _____

My total gift is:

\$ _____

Does your gift amount qualify at the following level:

Section 2

Gareshare

One hour's pay per month.
My hourly wage is:

\$ _____

Pacesetter

One percent of your annual salary

\$ _____

Red Feather

My gift alone, or with my spouse's gift is at least \$1,000

Spouse's Name: _____

Spouse's Employer: _____

Other Amount

Gifts of any amount are appreciated.

\$ _____

I would like to give to:

Section 3

United Way of Northwest Florida

UW Affiliated Agency(ies)

2-1-1 Northwest Florida United Way of Northwest Florida's information and referral network. Call 211 or visit www.211nwfl.org.

Community Impact Fund

Local, knowledgeable volunteers distribute funds to meet the most critical local human service needs.

_____ Agency Code \$ _____ Dollar Amount

_____ Agency Code \$ _____ Dollar Amount

Other Agency Agency must be a qualified non profit, 501(c)(3). Please provide full legal name and location of charity.

Please use my gift in the following county:

Bay Calhoun Gulf Holmes Jackson Washington

Thank you for investing in United Way. No goods were given nor services provided in whole or partial consideration for this contribution. A copy of the official registration and financial information of United Way of Northwest Florida, principally located in Florida, may be obtained from the Division of Consumer Services by calling toll-free (800) 435-7352. Registration does not imply endorsement, approval, or recommendation by the state. Per IRS Notice 2006-110, donors whose contributions are made by payroll deduction and choose to itemize their taxes will need, in addition to a copy of this form, paystubs, W-2, or other employer document indicating the amount withheld and paid to United Way of Northwest Florida. Please consult your tax advisor for more information.

White: United Way Copy

Yellow: Employer Copy

Pink: Donor Copy