

GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED.



Visit us on Facebook: **United Way of Pasco County**
or on the web at: **www.unitedwaypasco.org**

United Way of Pasco County

8040 Washington Street
P.O. Box 609, Port Richey, FL 34673
727-845-3030 • Fax 727-845-3032

STEP 1: FILL IN YOUR PERSONAL INFORMATION (PLEASE PRINT)

DR / MR / MRS / MS										FIRST NAME										MI		LAST NAME												
ADDRESS - HOME																				CITY					STATE					ZIP				
COMPANY										BRANCH LOCATION																								
DAYTIME TELEPHONE										E-MAIL																								

Please sign me up for the United Way Newsletter so I can stay informed about volunteer opportunities in my community.

STEP 2: CHOOSE YOUR DONATION AMOUNT

YES! I WANT TO MAKE A DIFFERENCE IN WHAT MATTERS.

Investment Opportunities:

United Way's Community Impact Fund: \$ _____

Your investment to the Community Impact Fund will change lives. Your money works to provide people with the opportunities and resources they need to move forward and build new futures in a strong, caring community.

\$5 per week or \$260 per year provides...
quality care for seven weeks for a child that has been abused, abandoned or neglected.

\$10 per week or \$520 per year provides...
a homebound senior transportation four times a month for medical appointments or grocery shopping to help sustain their independence.

\$20 per week or \$1040 per year provides...
clothing for two families following a disaster.

\$35 per week or \$1820 per year provides...
after school care for a special needs child for six months.

\$50 per week or \$2600 per year provides...
a person with disabilities eight weeks of comprehensive work experience to acquire skills for competitive employment.

Fair Share: \$ _____

A Fair Share donation equals a pledge of one hour's salary per month. "I want to donate my Fair Share"
One hours salary = \$ _____ x 12 months = (total donation) \$ _____

Additional Investment Service: \$ _____

As a service to our corporate partners, we can process a gift to a specific non-profit agency.

To: _____

Address: _____

My Total Investment Is: \$ _____

STEP 3: CHOOSE YOUR PAYMENT METHOD

PAYMENT OPTIONS

PAYROLL DEDUCTION

A. I authorize my employer to deduct the following per pay period:
 \$50 \$25 \$10 \$5 Other \$ _____

B. Remaining pay periods: _____

Signature _____

REQUIRED

PAYROLL TOTAL
(A X B)

\$ _____

CASH OR CHECK

Check payable to United Way of Pasco County

\$ _____ Check # _____

Cash \$ _____

CASH/CHECK TOTAL

\$ _____

THANK YOU FOR YOUR TOTAL CONTRIBUTION OF

OVERALL TOTAL

This amount makes me a Leadership giver
(Leadership Givers contribute a minimum of \$1,000/yr.)

\$ _____

LOYAL CONTRIBUTOR

I have been contributing to the United Way for ten years or more,
beginning in _____.

Please sign here to authorize your pledge. Please check the accuracy of all your entries. Thanks for investing in United Way.

X _____ Date _____

COORDINATORS - PLEASE FORWARD A COPY OF THIS PLEDGE CARD TO UNITED WAY OF PASCO COUNTY

Thank you for your contribution through the United Way campaign. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2 or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.

"A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll-free within the state, (1-800-435-7352). Registration does not imply endorsement, approval, or recommendations by the state." United Way of Pasco County, Inc. neither hires nor contracts with professional solicitors. Each contribution received by United Way of Pasco County is applied 100 percent to approved programs, services and operations. Registration #CH728.

Your Investment Does Matter...

THANK YOU.