

100%

OF YOUR DONATION
STAYS LOCAL TO SUPPORT
PROGRAMS IN HALL,
HAMILTON, HOWARD
AND MERRICK COUNTIES.

PLEASE GIVE.

UNITED WAY PLEDGE FORM



Name: _____

Address: _____

Email: _____ Cell: _____



HEARTLAND UNITED WAY

BUILDERS CLUB LEVELS

(include combined spousal giving)

- Foundation \$500 up
- Cornerstone..... \$750 up
- Pioneer \$1,000 up
- Pillar \$2,500 up
- Leadership Circle \$5,000 up
- Alexis de Tocqueville..... \$10,000 up

Please list me (include spouse) in recognition materials as:

I have been contributing to the United Way for _____ year(s).

Do not publish my name for acknowledgment or recognition purposes.

1441 N. Webb Rd • Grand Island, NE 68803
(308) 382-2675 • heartlandunitedway.org

ANNUAL GIFT 		IMAGINATION LIBRARY GIFT \$30.00 <input type="checkbox"/> No Thank You Your \$30 gift will sponsor a child for one year in the Imagination Library Program.		TOTAL GIFT 	<i>Thank You!</i>
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- Cash
 Check (Please attach # _____)
 Credit/Debit Card (Call UW office or visit heartlandunitedway.org to donate.)
 Bill Me (Select one)
- Monthly
 Quarterly
 One Time (List month) _____

COMMUNITY INVESTMENT FUND \$ _____
 I want my donation to have the most power by supporting the Heartland United Way and 21 Community Partners and programs.

DONOR DESIGNATION I wish to designate my donation as follows: (List non-profit name and amount)

Agency: _____ \$ _____

Agency: _____ \$ _____

Signature _____ Date _____

Age Category (for demographic purposes only): 18-36 37-52 53-71 72+