

# LIVE UNITED™



REACH OUT A HAND TO ONE AND INFLUENCE THE CONDITION OF ALL

Shiawassee United Way  
310 W. Main St., Suite 1A  
Owosso, MI 48867  
989-723-4987

## United Way Pledge Form

MR/MRS/MS/DR FIRST NAME MI LAST NAME

HOME ADDRESS (For credit card charges, address listed must be your billing address.) CITY

STATE ZIP HOME PHONE DAYTIME PHONE

COMPANY NAME

Want to see how your contribution is making a difference? Please provide your home email address so we can show you how your contribution is making a difference. Your email address will not be shared or sold.

Home Email Address \_\_\_\_\_

PLEASE SELECT PAYROLL DEDUCTION OR A DIRECT GIFT. ALL MONIES DONATED STAY IN SHIAWASSEE COUNTY TO SERVE THE PEOPLE OF SHIAWASSEE COUNTY

EASY PAYROLL DEDUCTION —OR—  DIRECT GIFT

My total annual gift:

A. I want to contribute the following amount each pay period:  
 \$50  \$25  \$10  \$5  
 Other \$

Direct gift to be paid by:  
 Cash  
 Personal check (enclosed)  
 Credit Card Exp. \_\_\_\_\_  
 Card # \_\_\_\_\_  
 Online (Please go to [www.shiawasseeunitedway.org](http://www.shiawasseeunitedway.org) to donate through United e-Way Truist secured site)

MY GIFT OF \$250 OR MORE  
 qualifies me for recognition as a Leadership Giver  
  
 Please list my/our name(s) as follows: \_\_\_\_\_  
 I prefer that my gift remain anonymous.

Signature Thank you for giving to your Shiawassee United Way and making a positive difference throughout Shiawassee County!

CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY. (OPTIONAL) Total must equal amount given

Option A  
**INFLUENCE THE CONDITION OF ALL. United Way Community Action Fund.**   
 The most powerful way to invest your contribution

Option B

**BASIC NEEDS** Helping families in times of emergency  
 • Reducing child abuse & domestic violence  
 • Providing emergency relief for basic needs

**HUNGER NETWORK** Helping families become nutritionally stable  
 • Ensuring hunger is addressed throughout Shiawassee County  
 • Realizing efficiencies of scale so that more resources go to the families served  
 • Securing grants and other resources to share among member pantries in Shiawassee County

**EDUCATION** Helping children and youth achieve their potential through education  
 • Improving access to early learning opportunities and quality, affordable child care.  
 • Partnering with schools and parents to improve graduation rates  
 • Providing after-school and mentoring programs for at-risk youth

**HEALTH** Improving People's Health  
 • Increasing access to critical healthcare services  
 • Supporting senior citizens in maintaining healthy, independent lifestyles  
 • Increasing health education and preventive care

**STRENGTHENING FAMILIES** Helping families become stable and independent  
 • Providing advocacy services  
 • Strengthening financial independence

**211 IMPLEMENTATION**  
 • 24/7/365 Toll Free service directory [centralmichigan211.org](http://centralmichigan211.org)  
 • County-Wide Disaster Relief Information  
 • Information on Volunteer and Donation Opportunities.

Option C **Restricted Contribution (minimum \$100 per agency contribution) A 15% processing fee will be assessed**  
 Agency name & full address \_\_\_\_\_

Thank you for your contribution through the United Way campaign. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for you 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.

www.shiawasseeunitedway.org