

When you Give, Advocate or Volunteer, you LIVE UNITED. Thank you.

## 1 Choose Where Your Dollars Go

- United Way Community Impact Fund** \$ \_\_\_\_\_  
Local volunteers decide how your gift can do the most good.

Direct your gift to United Way's Education, Income or Health Priorities. Please select one or more below:

- EDUCATION.** Improve kindergarten readiness, improve academic performance and career readiness \$ \_\_\_\_\_
- INCOME.** Reduce hunger and homelessness, increase skills to improve self-sufficiency \$ \_\_\_\_\_
- HEALTH.** Decrease relationship violence and sexual assault, improve mental health, reduce alcohol and drug abuse, improve seniors' ability to live independently \$ \_\_\_\_\_

## 2 Choose to Belong (optional)

- EMERGING LEADERS MEMBER.** A networking and leadership training program (\$100+)
- WOMEN IN ACTION MEMBER.** A network of women interested in philanthropy, advocacy and volunteerism. (\$250+)
- SUMMIT LEAGUE MEMBER.** (\$600+)  
Base Camp - \$600-749 | Camp 2 - \$750-999  
Camp 3 - \$1000-1599 | Camp 4 - \$1600-2599  
Camp 5 - \$2600-3999  
Final Ascent Team - \$4000-9999  
Tocqueville - \$10,000+



## WIN THIS 2015 JEEP RENEGADE!

Make a donation of at least \$1.00 per week (\$52+ per year) during United Way of Marathon County's 2016 Campaign and you will automatically be entered to win the 2015 Jeep Renegade!

OFFICIAL SWEEPSTAKES RULES AT UNITEDWAYMC.ORG

Thank You to Our Generous Sponsors...

You can count on us!



View over 800 vehicles



## 3 Donor Information

PLEASE PRINT CLEARLY. Your personal information is kept confidential and will not be sold or shared at any time.

Mr.  Mrs.  Ms.  Dr.

Name \_\_\_\_\_  
First M.I. Last Age

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home E-Mail \_\_\_\_\_

Home Phone \_\_\_\_\_

Employer Name \_\_\_\_\_

Work E-Mail \_\_\_\_\_

Work Phone \_\_\_\_\_

My gift is combined with (Name) \_\_\_\_\_

Employed at \_\_\_\_\_

Please list our names as \_\_\_\_\_

I wish to remain anonymous.

Please send/e-mail me information on:

volunteer opportunities  planned giving  how my contribution is getting results

## 4 My Contribution

My Total Contribution Is \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYROLL DEDUCTION

\$ \_\_\_\_\_ each pay period for # \_\_\_\_\_ pay periods.

### BILL ME (\$50 minimum) Bill my above address

Quarterly - beginning in January  One time in \_\_\_\_\_ (month)

### ONE TIME GIFT Cash Check # \_\_\_\_\_

### CREDIT/DEBIT CARD Call 715-848-2927 or donate securely online at: <https://www.secure.unitedwaymc.org/servlet/eAndar.UserRegistration>

### STOCK OR APPRECIATED ASSETS Call 715-848-2927 for information

Keep a copy of this form for your tax records. United Way does not provide goods or services in whole or partial compensation for any contribution.

## 5 Optional

Please send my contribution to the following United Way funded program. (\$50 minimum)

Program Name & Designation Code (See program listing at [www.unitedwaymc.org](http://www.unitedwaymc.org)) Your gift to a special program will be the first dollars that program receives towards its grant. If total designations exceed the grant amount we have always honored requests; however, United Way has the explicit authority to redirect these gifts if necessary.

Please send my contribution to another United Way. (\$50 minimum)

United Way of Marathon County  
705 S. 24th Ave. Ste 400B  
Wausau, WI 54401

UnitedWayMC.org

