

# I WANT TO MAKE A DIFFERENCE TODAY!

YES! I pledge to strengthen my community by improving the lives of children, families, and those in need in Benton & Franklin Counties, as we recover and rebuild after the COVID-19 pandemic.



## 1 ABOUT ME

We use contact information to process gifts and occasionally tell you about community impact; we will not share it.

FIRST NAME	MIDDLE INITIAL	LAST NAME
EMPLOYER	EMPLOYEE ID NUMBER	SPOUSE/PARTNER NAME
PERSONAL EMAIL	( ) PERSONAL PHONE	YEAR OF BIRTH I'm retiring: MONTH/YEAR
HOME ADDRESS	CITY	STATE ZIP
Please tell us what name(s) to use to when we thank you in recognition materials: (Ex. John & Jane Smith)		
<input type="text"/>		
<input type="radio"/> I wish to remain anonymous. Please do not use my/our names for recognition purposes.		

## 2 MY IMPACT

EXAMPLES OF THE POWER OF YOUR GIFT

\$1,000 Help a domestic violence survivor get into safe housing | \$500 Shelter a homeless youth for 6 months  
\$250 Help an adult with disabilities get a job | \$100 Empower a victim of sex trafficking through therapy | \$50 Feed 20 people in need

### EASY PAYROLL DEDUCTION

A) Gift amount per pay period:

☐ \$500 ☐ \$250 ☐ \$100 ☐ \$75

☐ \$50 ☐ \$25 ☐ Other \$ \_\_\_\_\_

B) Your pay periods per year:

☐ 12 (monthly) ☐ 24 (bi-monthly) ☐ 26 (bi-weekly)

☐ 52 (weekly) ☐ One time ☐ Other \_\_\_\_\_

Total Annual Payroll Deduction (A x B):

\$ \_\_\_\_\_

### OTHER GIVING OPTIONS

A) Giving frequency:

☐ 12 (monthly) ☐ 4 (quarterly) ☐ One time

B) Amount /payment: \$ \_\_\_\_\_ Start date \_\_\_\_\_

Total Annual Payment (A x B) or cash/check total:

\$ \_\_\_\_\_

☐ Credit Card # \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_/\_\_\_\_ Security Code \_\_\_\_\_

☐ Cash/Check Check # \_\_\_\_\_ Date \_\_\_\_\_

☐ Bill Me \*If different than above, please provide billing address: \_\_\_\_\_

☐ Automatic Bank Withdrawal Routing # \_\_\_\_\_ Account # \_\_\_\_\_

☐ Please make this a perpetual gift

Check here to make your credit, bank withdrawal, or billing ongoing, until you request otherwise.

Your **consistent support** minimizes fundraising costs and puts more money where it's needed most.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

REQUIRED FOR AUTHORIZATION. Your donation is tax-deductible; please make a copy. No goods or services were provided in exchange for this contribution.

## THANK YOU FOR MAKING BENTON & FRANKLIN COUNTIES BETTER FOR EVERYONE.

### OPTIONAL

You can choose your preferred donation area(s) below. If no selection is made, it will be invested where it's needed most in our community.

☐ A I want to help my community recover from the effects of COVID-19. **Invest my donation where it is needed most— the areas of greatest need.**

☐ B Please distribute my donation as follows:

☐ EDUCATION \$ \_\_\_\_\_/YR

Helping kids succeed by educating parents, preparing children for school, and increasing graduation rates.

☐ HEALTH \$ \_\_\_\_\_/YR

Increasing access to physical and mental health care, and supporting our vulnerable populations.

☐ FINANCIAL STABILITY \$ \_\_\_\_\_/YR

Building independence by providing support and training that leads people to financial stability.

☐ BASIC NEEDS \$ \_\_\_\_\_/YR

Fighting to end hunger and homelessness, meet fundamental needs, and eliminate violence.

☐ C Please designate to the 501(c)(3) organizations below\*. ☐ Do not release my/our names to agency below.

Agency Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ \$ \_\_\_\_\_ Year \_\_\_\_\_

Agency Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ \$ \_\_\_\_\_ Year \_\_\_\_\_

Donor: please make a copy for your records and return original to your Campaign Coordinator.

Campaign Coordinator: please provide original to payroll before forwarding to United Way.

uwbco.org | 401 N. Young St. Kennewick, WA. 99336 | 509-783-4102

# UNITED, we shape the future.



Last year, we read the stats in Benton & Franklin Counties:

**1 IN 50**  
STUDENTS ARE  
**HOMELESS**

**13%** INCLUDING KIDS  
AND SENIORS  
**LIVE IN POVERTY**

**19%** OF HIGH SCHOOL  
STUDENTS ARE  
**NOT GRADUATING**

**1 IN 25** CHILDREN  
REPORT  
**ABUSE OR NEGLECT**

**We responded!** We UNITED volunteers, agency partners, local companies and donors to create sustainable change. UNITED, we improved the lives of **57,413** local children and neighbors.

**52,051** RECEIVED ACCESS  
TO BASIC NEEDS

**2,474** RECEIVED ACCESS TO  
HEALTH CARE SERVICES

**2,700** RECEIVED RESOURCES  
TO SUCCEED IN SCHOOL

**188** RECEIVED RESOURCES  
TO BECOME OR STAY  
FINANCIALLY STABLE

**THAT WAS BEFORE COVID-19. IT WILL TAKE MORE TO HELP OUR COMMUNITY RECOVER. WILL YOU HELP?**

We all benefit when local children, their families, and our most vulnerable neighbors receive access to education, health, financial stability, and basic needs. UNITED, we can make the “new normal” healthy and safe.

#### OUR PRIVACY PLEDGE TO YOU:

We will never share or sell any of your information. If you designate your gift, your information may be given to that agency unless you select otherwise on the front of this form.

We may publish your name and/or company in recognition materials, unless you select otherwise.

#### WE'LL CONTACT YOU IF:

Designated organization(s) is not easily identified by information provided, is not a registered 501(c)(3), does not certify as Patriot Act compliant, is no longer in operation, and/or does not cash any checks within one year of payout.

\*If we are unable to reach you, your gift will go to where it is needed most in our local community—our areas of greatest need.

401 N Young St  
Kennewick WA. 99337

**UWBFCO.ORG**

 Facebook.com/uw.bfco

 @unitedwaybfco



United Way of  
Benton & Franklin Counties