ANNUAL PLEDGE FORM



#GiveWhereYouLive

United Way of the Greater Chippewa Valley

PERSONAL & WORK INFORMATION	
□ MR. □ MRS. □ MS. □ MX. □ DR. FIRST NAME	STATE ZIP CODE Birth date//
I WISH TO INVEST BY (CHOOSE THE OPTION THAT BEST FITS YOUR LIFE!)	
1. RECURRING PAYROLL DEDUCTION - PLEASE DEDUCT: AMOUNT PER PAY PERIODS = \$ TOTAL INVESTMENT PAY PERIOD EXAMPLE: WEEKLY (52) / BI-WEEKLY (26) / SEMI-MONTHLY (24) / MONTHLY (12) / OR OTHER	
2. ONE TIME PAYROLL DEDUCTION - AMOUNT: \$ DATE TO BE DEDUCTED:/	
3. DIRECT DONATION - AMOUNT: \$ CASH CHECK # & DATE: / / / CREDIT CARD / ACH (PLEASE VISIT WWW.UWGCV.ORG OR CALL US!)	WANT TO GET MORE INVOLVED? □ ADVISORY COUNCIL □ BOARD MEMBERSHIP □ CAMPAIGN CABINET □ EMERGING LEADERS □ TEAM LEADERSHIP CIRCLE
☐ INVOICE ME (1 TIME: MIN. OF \$50 QUARTERLY: MIN. OF \$100): ON THIS DATE:/ ☐ EMAIL ME, PLEASE!	MY INVESTMENT LAST YEAR WAS: \$ I'D LIKE TO INCREASE BY: □ 5%
4. *LEADERSHIP LEVEL DONATION - 5. LEGACY GIVING - AMOUNT: \$ STOCKS / SECURITIES PLANNED GIVING *An annual investment of \$500+ qualifies you into our Leadership Circle donor group!	□ 10% □ 15%
I WANT MY DONATION TO BE INVESTED IN (CHOOSE THE OPTION(S) YOU'RE PASSIONATE ABOUT)	
PLEASE INVEST MY DOLLARS TO DO THE MOST GOOD (SUPPORT ALL OF UNITED WAY'S INITIATIVES, IN CHIPPEWA & EAU CLAIRE COUNTIES)	
CHOOSE THE INITIATIVE(S): HEALTH EDUCATION FINANCIAL STABILITY BASIC NEEDS DIGITAL EQUITY CHIPPEWA & EAU CLAIRE COUNTIES CHIPPEWA COUNTY EAU CLAIRE COUNTY	
SIGN HERE: DATE TO BE DEDUCTED:/	/ I/WE WISH TO REMAIN ANONYMOUS

THANK YOU FOR YOUR GENEROSITY

OKAY, LET'S BREAK THIS DOWN -

HOW YOUR INVESTMENT MAKES A DIFFERENCE:

\$10

ONE MONTH OF MENTAL HEALTH SERVICES

to one survivor of domestic violence, abuse or assault

16 NUTRITIOUS MEALS

to a person in need

FINANCIAL COACHING, EDUCATION & DEBT MANAGEMENT

to one household.

\$25

ONE MONTH OF NURSE HOME VISITING SERVICES for one family.

ONE MONTH OF MENTAL HEALTH SERVICES for one patient.

TWO MONTHS OF HOUSING OR SUPPORTIVE SERVICES

for one household experiencing being un-housed.

\$50

80 NUTRITIOUS MEALS

for a person in need.

TEN MONTHS OF COMPREHENSIVE CASE MANAGEMENT

for households facing being un-housed.

\$100

ONE YEAR OF SOCIAL CONNECTEDNESS PROGRAMMING

for one youth between the ages of 7 - 18 years old.

SIX SESSIONS OF MENTAL HEALTH THERAPY

for household with children.



410 NUTRITIOUS MEALS

to a person in need.

TWO YEARS OF MENTAL HEALTH SERVICES

to one household impacted by domestic violence, abuse and assault



ONE YEAR OF MENTAL HEALTH THERAPY

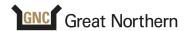
for one household with children.

TWO YEARS OF MENTAL HEALTH SERVICES

for two households impacted by domestic violence, abuse and assault





















YOU WILL BE AUTOMATICALLY ENTERED INTO OUR SWEEPSTAKES DRAWING WHEN YOU:

- PLEDGE AS A NEW DONOR, \$1 OR MORE / PAYCHECK

INCREASE YOUR PREVIOUS PLEDGE BY \$1 MORE / PAYCHECK

□ DO NOT INCLUDE ME IN THE SWEEPSTAKES DRAWING



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