

# United Way of Larimer County Donor Pledge Form

## STEP 1: MY INFORMATION

Name \_\_\_\_\_

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

City/State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

*Optional (To reduce cost and waste, United Way of Larimer County uses e-mail as a main form of communication. By providing your e-mail address, you are authorizing United Way of Larimer County to communicate with you via e-mail. You may opt out of these communications at any time. We do not sell, trade or share your contact information with others).*

## STEP 2: MY GIFT

My total gift amount \$ \_\_\_\_\_

**Cash**

**Check** (payable to United Way of Larimer County)

Check # \_\_\_\_\_ Date \_\_\_\_\_

**Stocks, Other Assets and Bequests**

(For more information, call United Way at 970.407.7000)

**Credit Card** (circle one)

Visa    MasterCard    American Express    Discover

Account # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV (3 or 4 digit security code) \_\_\_\_\_

Charge \$ \_\_\_\_\_

One-Time<sup>(Now)</sup>    Monthly<sup>(12)</sup>    Quarterly<sup>(4)</sup>    Semi-Annually<sup>(2)</sup>

Please indicate month charge(s) are to begin:

If no month is indicated, charge(s) begin January 2011

**Automatic Bank Withdrawal** (include a voided check)

Withdraw \$ \_\_\_\_\_

One-Time<sup>(Now)</sup>    Monthly<sup>(12)</sup>    Quarterly<sup>(4)</sup>    Semi-Annually<sup>(2)</sup>

Please indicate month charge(s) are to begin:

If no month is indicated, charge(s) begin January 2011

**Direct Bill from United Way** (minimum \$10 per bill)

Bill me \$ \_\_\_\_\_

One-Time<sup>(Now)</sup>    Monthly<sup>(12)</sup>    Quarterly<sup>(4)</sup>    Semi-Annually<sup>(2)</sup>

Please indicate month billing statements are to begin:

If no month is indicated, billing(s) begin January 2011

**I will be contributing through a Donor Advised Fund in the amount of \$ \_\_\_\_\_**

Institution name \_\_\_\_\_

**Fund selection and signature required on back**

## STEP 3: PLEASE CHOOSE HOW YOU WANT TO MAKE A DIFFERENCE IN YOUR COMMUNITY

- Community Impact Fund**
- Solid Foundations Fund**
- Bridging the Gap Fund**

Descriptions of these funds can be found on our website and brochure.

United Way of Larimer County will gladly honor your designation to any 501(c)(3) with an office in the state of Colorado. A maximum of two designations with a minimum of \$20 each is allowed. Unless otherwise specified, multiple designations will be split evenly. If less than \$20 is designated, funds will be distributed to United Way of Larimer County's Community Impact Fund.

## LEADERSHIP DONORS (\$500+) MUST COMPLETE THIS SECTION:

### ANNUAL REPORT RECOGNITION LISTING\*

Please indicate how you would like your name(s) listed in United Way of Larimer County's annual report:

- Please list my name as it appears in step 1.
- Please list my/our names as follows:

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- Please do not list my name.

\*View recognition policy online at [www.uwaylc.org](http://www.uwaylc.org)

- Check this box if you do not want to receive acknowledgement of your gift.

## STEP 4: MY SIGNATURE

Signature \_\_\_\_\_

Date \_\_\_\_\_

### United Way of Larimer County **Loyal Contributor Program**

- Please register me, I have been contributing to United Way for \_\_\_\_\_ years.

**GIVE. ADVOCATE. VOLUNTEER.**  
**LIVE UNITED**™



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