

Unite to fuel Change



Greater Twin Cities
United Way

2024/2025 Greater Twin Cities United Way Pledge Form | 404 South Eighth Street, Minneapolis, MN 55404-1084 | (612) 340-7400

My United Way Investment (choose one or more of these giving options):

1 Community Impact Fund: \$ _____
Greatest Need: I want to support our nonprofit partnerships in areas of greatest need, such as housing, food, education and jobs.

2 I want to direct my gift to:

211
provide referrals to 40,000+ statewide resources and services to ensure people have their basic needs met
\$ _____

Advocacy
impact policy decisions that support housing, food, education and jobs
\$ _____

Women United
support success for women and children
\$ _____

Arise Project
support LGBTQ homeless youth
\$ _____

X Signature (required) _____ Date _____

My Information

Please print firmly in ALL CAPITAL letters. Your personal information is kept confidential.
Please list home address, phone and email to receive recognition and tax receipt letters.

First Name MI Last Name

Spouse's/Partner's Name (Combine and recognize my gift with my spouse/partner.)

Home Address City

State Zip Preferred Phone Home Cell Work Preferred Email: _____

- I want my gift to remain anonymous in all recognition materials. I am a union member.
 I would like information about Planned Giving at United Way. I wish to be listed in recognition materials as follows: _____
 I have included United Way in my will/estate plan.

My Giving Options

Important tax information: Per IRS Notice 2006-110, be sure to keep a copy of this form for your tax records.

Easy Payroll Deduction \$ _____ x _____ = \$ _____
I will contribute each pay period Pay periods per year My total annual gift

Make a one-time gift of \$ _____ (Must equal total investment from section above.)

Cash

Check (attached). Checks cashed upon receipt.

Credit/Check Card (Visa/Mastercard/DISCOVER/American Express). We respect your privacy, so to make your gift by credit or check card, visit gtcuw.org/pledge.

Bill me in 2025 \$ _____ If requesting a bill, please provide a home mailing address.

Semi-annually Quarterly One-time _____ (month)

To give a gift of stock, please use the 'Bill me' option and contact our stock coordinator at stock@gtcuw.org for further instructions on making a stock transfer or with any questions.

Gift restriction is offered as an optional service. The most effective way to help the community is by making an unrestricted gift to United Way.

Designate a gift to a specific 501(c)(3) or another United Way. \$ _____

Read our designation policy at: gtcuw.org/donate/designation-policy. (Full agency name and address required below.)

Agency Name

Address

City/State/Zip

I wish to remain anonymous to the above organization. (If you check the anonymous box in the MY INFORMATION section, your name will remain anonymous to all organizations.)

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Thank you for your generosity!

Your gift may be tax-deductible and will support health and human services in 2025. United Way acknowledges no goods or services were provided in exchange for your gift.