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MY INFORMATION *(Please print clearly)*

First Name	Middle Initial	Last Name		
Home Address - Street	City	State	Zip Code	
Email Address	Personal Phone	Work Phone		
Employer				<input type="checkbox"/> <i>I'm retiring this year. Please keep in touch.</i>

2

MY CONTRIBUTION

EASY PAYROLL DEDUCTION

I will contribute the following amount each pay period:

- \$1 \$5 \$10 \$20
 Other Amount \$_____

I am paid:

- Weekly (52) Bi-Weekly (26)
 Bi-Monthly (24) Other _____

Total Gift: \$ _____

GIFT ENCLOSED

Please make checks payable to United Way of Idaho Falls and Bonneville County

Total Gift: \$ _____

- Cash Check Credit Card

Card #: _____

Expires: _____

CVV: _____

My gift *(please combine my gift with spouse/significant other)* of \$500 or more per year qualifies for membership in the United Way of Idaho Falls & Bonneville County Leadership Circle. Names as they should be published:

Anonymous Gift _____

SIGNATURE:

DATE:

3

MY IMPACT *(Optional)*

COMMUNITY IMPACT FUND
 Make the greatest impact in our community

EDUCATION PROGRAMS

HEALTH PROGRAMS

FINANCIAL STABILITY PROGRAMS

Note: Designations may only be made to nonprofit organizations holding a tax-exempt status from the Internal Revenue Service providing health and human service programs to the residents of Eastern Idaho. This includes all United Ways and national organizations that serve the same residents listed above. The minimum contribution that can be designated is a contribution of \$520 annually. United Way of Idaho Falls and Bonneville County puts great effort into fulfilling the wishes of our donors. Designations with incomplete information will be disbursed through the Community Investment process.

I am interested in:

- Volunteer Opportunities
 Community Solutions Panel Member Opportunity

United Way of Idaho Falls & Bonneville County
 330 Shoup Ave, Ste 202, Idaho Falls, ID 83402
 p: (208) 522-2674

unitedwayif.org



Thank you for your contribution through the United Way campaign. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2, or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.