2024 Donor Pledge Form

TELL US ABOUT YOURSELF

United Way of Central Minnesota



FIRST NAME			M.I.	.I. LAST NAME			BIRTH YEAR	
HOME ADDRESS						CITY	STATE	ZIP CODE
EMPLOYER CELL PHONE NUMBER PLANNED GIFT I have included United Way of Central M or estate plan and am a Granite Society Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the ben planned gift and how to become a Granite State of Medical I would like to learn more about the state of Medical I would like to learn more about the state of Medical I would like to learn more about the state of Medical I would like to learn more about the state of Medical I would like the learn more about the state of Medical I would like the learn more about the state of Medical I would like the learn more about the state of Medical I would like the learn more about the learn more abo				ral Minneso ty Member. e benefits o	I would like more in (ages18-35) or the A Volunteer I would like to receive the control of making a I would like to receive the control of		or Always United Affinity Group information about the YLU Affinity Group e Always United (retiree/pre-retiree) Group. eive the weekly Volunteering Email Newsletter. ting to United Way since	
MAKE YOUR CONTRIBUTION Leadership Giving Level - Only \$40 per pay period or \$1,000 annually. See back for more information. STEP 1: FREQUENCY								
Dow't forget! Ves, I'd like to rollover my donation every year.			☐ Payroll De Amount per p X Number of Pa = Total Annual	pay period	□ Cash Donation Amount	Check # (PAYABLE TO UNITED WAY OF CENTRAL MINNESOTA) Donation Amount	Card #	CVC 3 Digit code he phone, please leave a daytime can reach you:
Bill Me If you would like to be billed, please list a daytime phone number where we can reach you to collect your information:								
UP	FIONAL: I WOULD LIKE TO SU Description		Support students from cradle to career through Partner For Student Success, Imagination Library, Community Learning Centers, and more.			dership Levels		
PRIORITY AREAS		FINANCIAL STABILITY HEALTH		Improve the financial health of families in Central Minnesota reducing barriers to stable housing and establishing and maintaining the Central Minnesota Child Care Fund to suppo sustainable access to childcare. Help raise awareness and remove the stigma surrounding m health support in Central Minnesota.		d establishing and ild Care Fund to support	Co-Donor Name Co-Donor Employer Co-Donor Amount Name Recognition for Publications	
	□ EMERGENCY SAFETY NET		Ensure the very basic needs of food, shelter and utilities are met for all residents in Central Minnesota.			☐ I prefer to remain anonymous.		
SIGN AND DATE HERE TO AUTHORIZE YOUR PLEDGE AND CONFIRM PAYMENT SIGNATURE: DATE: No compensation, goods, or services have been given to the donor from United Way of Central Minnesota in return for this contribution.								



United Way brings people together in purpose.

Together, we mobilize communities to close gaps and open opportunities for everyone in Central Minnesota.

We know improving access to education, health, and financial stability can help all thrive.

United, businesses, leaders, public officials, and caring individuals like you work to expand opportunities for local residents to succeed. On behalf of United Way, our partners, and the thousands of individuals and families who receive care and support as a result of your generosity. **#LiveUnited**

THANK YOU for your continued support!



United Way of Central Minnesota

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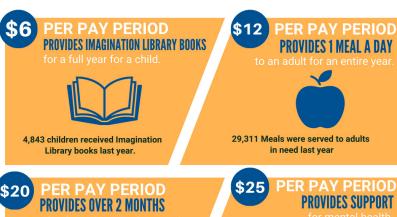
We GIVE Here.



When you give to United Way of Central Minnesota your donation is staying right here, in your community. By connecting donors, companies, volunteers, partner agencies, and other organizations we can work together to making lasting change and create a better life for all. Your contributions make this posible.

WHEN YOU GIVE TO UNITED WAY

Your dollar supports the whole community







In Central Minnesota last year, our 211 resource line received 4,367 requests for support.

LEADERSHIP GIVING

Leadership Giving offers opportunities to address our community's most pressing problems. Other benefits of giving include increasing your knowledge of the innovative ways needs are being addressed in Central Minnesota, building your reputation as a community leader, and being recognized as such through your employer and United Way.

All recognition levels include combined gifts between spouses

Young Leaders in Giving \$250 & Above (age 18-35)

Leaders in Giving \$1,000 & Above **Pillar Member** \$1,000 - \$1,499 **Baluster Member** \$1,500 - \$2,499 Milestone Member \$2,500 - \$3,499 **Cornerstone Member** \$3,500 - \$4,999 **Capital Member** \$5,000 - \$7,499 **Keystone Member** \$7,500 - \$9,999 **Tocqueville Society** \$10,000