

# United Way of Whatcom County

1500 Cornwall Avenue Ste 203  
Bellingham WA 98225-4522  
Phone: 360.733.8670 Fax: 360.733.8674  
UnitedWayWhatcom.org



United Way  
of Whatcom County

## CONTACT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	M.I.	Last Name	Personal Telephone	
<input type="text"/>			<input type="text"/>	<input type="text"/>
Mailing Address			City	State Zip
<input type="text"/>			<input type="text"/>	
Personal Email			Company Name/Employer	

By providing your contact information, you consent to receiving periodic mail from United Way, including electronic mail, from which you can unsubscribe at any time.

## LEADERSHIP GIVING: (Special recognition provided to contributors giving a combined household total of \$1,000 or more per year.)

- Recognize me/us as: \_\_\_\_\_ **OR**  No, thanks. Keep my gift anonymous.  
 This is a joint gift with my spouse/partner. (Gift may be combined with spouse/partner for recognition.)

<input type="text"/>	<input type="text"/>
Spouse's/Partner's Name	Spouse's/Partner's Employer

## MAKE A PAYROLL PLEDGE... (span a 12 month period and do not auto renew)

**Payroll Deduction (Every Pay Period):** \_\_\_\_\_ x \_\_\_\_\_ = \$ \_\_\_\_\_  
Amount per pay period (\$100, \$50, \$25, \$10, etc.)      No. of pay periods in a year      Total Annual Gift

**Yes!**  
Contact me. I'd like to explore including United Way in my will.

## A ONE-TIME GIFT...

**Cash/Check:** Enclosed, payable to United Way of Whatcom County \$ \_\_\_\_\_

**Bill Me:** \_\_\_\_\_ \$ \_\_\_\_\_  
Billing Address (if different than listed above)  
    
City State Zip

**Credit Card:** \$ \_\_\_\_\_  
Pay securely online. Visit [UnitedWayWhatcom.org/donate](http://UnitedWayWhatcom.org/donate) or call (360)733-8670.

## ...OR A MONTHLY RECURRING GIFT. (no set end date, may be cancelled at any time)

**Bill Me:** \_\_\_\_\_ \$ \_\_\_\_\_ per month  
Billing Address (if different than listed above)  
    
City State Zip

**Credit Card:** \$ \_\_\_\_\_ per month for a total annual gift of \$ \_\_\_\_\_  
Pay securely online. Visit [UnitedWayWhatcom.org/donate](http://UnitedWayWhatcom.org/donate) or call (360)733-8670.

Restrict \$ \_\_\_\_\_ (\$100 minimum) of my contribution **annually** to the following 501(c)(3) non-profit:   
 mailing address  city  state  zip

- Share my name, contact info, & restricted gift amount with the 501(c)(3) specified.  I agree to the designation policy posted on [UnitedWayWhatcom.org](http://UnitedWayWhatcom.org).

We keep your information private, except in cases of the following: 1.) To coordinate with payroll representatives for workplace payroll deduction; 2.) to recognize leadership gifts (unless you choose to remain anonymous); 3.) per your request in the case of a restricted gift. No goods or services were provided in exchange for this contribution. Gifts made to United Way of Whatcom County are tax deductible. EIN 91-0570788 To arrange an alternative billing schedule, contact us.

**SIGNATURE** (required)

Date: / /

**THANK YOU!**