UNTIL THE FIGHT IS WON

Signature



Creating and cultivating an unbreakable network of support for a strong, healthy and equitable community

formerly United Way of Greater Topeka and United Way of Douglas County

I. CONNECT									
	MR/MRS/MS/DR	First Name	MI Last Name		Suffix				
Home Address			City	State	ZIP				
Home/Cell (Circle	e which phone line)	Permanent Email	Address	Work Email address	Work Email address				
2. INVEST	My total	investment this	s year is \$	Please choose your payn	nent option below.				
PAYROLL DED	UCTION THROUGH MY	EMPLOYER	I want to pledge the following Number of pay periods:		Coordinator if you are unsure				
CASH/CHECK	Amount e	nclosed \$	Check #	Make checks paya	ble to United Way of Kaw Valley				
CREDIT CARD	>> Credit Cards	cannot be processed e-mail address in Section 1.	NO:Expiration Date:						
BILL ME		A. Choose a method O Debit my bank account—Please attach voided check O Send my bill B. Choose a frequency O Monthly (x 12) O Quarterly (x 4) O Bill me one time on:							
STOCKS & SECURITIES	Get forms	Get forms and instructions at www.uwkawvalley.org/legacy-giving or call 785.228.5113.							
			y combine investments to reach leade ng Leaders Society. (Check the YLS bo						
•			County O Jefferson County (e applied to the county where you are	-	Douglas County				
3. RECOGNIZE				Date of Birth					
How would you like your name to appear in recogn O Please do not list my name in publications O List me as a combined giver with			(Example: John & Jane Smith, Dr. Jane Smith, John Jones & Jane Smith)						
4 ENGAGE			Name	Company	/				
	•	ng Leaders Society giving opportunities	-40 or younger; \$500 or more).	O I plan to retire in: ${Yea}$	ır				
5. SIGN & DATE			Thank you for your investme	ent. No goods or services were pro f this form for your tax records. You	vided in exchange for this				

stub, W-2 or other employer document showing the amount withheld and paid to a charitable

organization. More information on allowable deductions is available at

https://www.uwkawvalley.org/waystogive.

Date

		UPTIONAL DESIGNATIONS	2			way 😂			
\$				re areas, please enter yo ow how much goes to e		United Way of Kaw Valle			
\$		WHOLE FAMILY: CHIL	DHOOD SUCCESS						
			and their families/care sitation and early educ	givers off to the best po ation opportunities.	ossible start				
\$		WHOLE FAMILY: FAM	ILY SUCCESS						
		adults by helping	children succeed in so	and economic mobility chool, preparing studen g financial literacy befor	ts and adults to				
\$		WHOLE FAMILY: FAM	ILY SUPPORTS						
		to safe, affordabl healthcare and pi	le and stable housing; rescription medication s of domestic violence	suring food security; ac access to mental and p , and services/intervent , sexual assault, stalking	hysical tions that				
\$		DOLLY PARTON'S IMA	DOLLY PARTON'S IMAGINATION LIBRARY						
			gination Library: \$25 giv :: O Shawnee County	ves a child a book every i y O Jackson County	month for a year.				
\$		GIVE TO ANOTHER UN	GIVE TO ANOTHER UNITED WAY (\$50 MINIMUM INVESTMENT)						
				y in another area by pro rhood served by that Ur		i			
		UW Name or ZIP Code							
\$		GIVE TO A UWKV PAR	RTNER (\$50 MINIMUM INVESTMENT	PER PARTNER)					
	Scan QR code to see the list online			uwkawvalley.org/comm Campaign Coordinator.	unitypartners,				
		Name:		Code:					
IEI 4947 WAS		Name:		Code:					
JOIN WOM	EN UNITED								
Women Unit	ed provide Fill out the eparately fr	e information below ar	nd attach your paymen	d children in crisis situa it. Women United contril equires a minimum \$100	butions are	United we can do anything			
CASH/CHECK	Amou	unt enclosed \$	Check #	Make checks payable t	to United Way of Ka и	v Valley.			
CREDIT CARD Amoun		unt to charge \$	NO:		O VISA	O Discover			
			Expiration Date:		ОМС	O AMEX			