INVEST IN OUR COMMUNITY TODAY!

Twin County United Way
Pledge Form

Text to Give: Text TCUW to 40403 | Donate online: www.tcuw.org

www.tcuw.org P.O. Box 1660 • Lewiston, ID 83501 208.743.6594 phone

STEP

Mr/Ms/Dr | First Name | MI | Last Name | Jr/Sr

Preferred Name | Personal Mailing Address

City | State | Zip Code | Employer

Phone Number ◯Cell ◯Direct ◯Home | Personal E-mail Address

◯ I do not want to receive Twin County United Way e-newsletters.
◯ I wish for my gift to remain anonymous.

STEP 2 Choose your amount and method of payment.

Easy Payroll Deduction: I want to contribute the following amount each pay period:
(If you are paid every other week, use 26 pay periods. If twice a month, use 24 periods.)

$ _____ Per Paycheck x _____ Pay Periods = $ _____ Payroll Deduction Amount

Cash (Enclosed):
$ _____ Cash Enclosed

Check (Enclosed):
$ _____ Check Enclosed

***Charge Me:** ◯ Visa ◯ MC ◯ American Express
$ _____ Per Charge x _____ 1, 4 or 12 = $ _____ Total Charged Amount
Card Number
Expiration | Zip Code | CVV

***Bill Me:**
$ _____ Per Invoice x _____ 1, 4 or 12 = $ _____ Total Billed Amount

***Automatic Bank Withdrawal:** (Attach voided check.)
$ _____ Per Month x _____ 1 or 12 = $ _____ Total Amount

= $ Total Gift Amount

*Minimum $50 for these donation options.

Venmo: @twincountyunitedway
Paypal: @tcuw

◯ I would like my gift to be perpetual and continue until I cancel.
◯ I would like to be contacted about planned giving or other donation options.

STEP Please choose how you want to invest in your community.

% Area of Greatest Need	Make the greatest impact in our community! Invest in what is needed most and what works locally to advance education, income and health.
% Education/Cradle to Career	Help children achieve their full potential
% Income	Fight poverty and promote financial independence.
% Health	Improve the overall health of people in Asotin and Nez Perce counties.

% Designated Contribution
NONPROFIT NAME | NONPROFIT ADDRESS

Designations must be to a 501(c)3 nonprofit that is registered with the IRS. If you choose to give THROUGH United Way to another organization, your designated gift must be at least $50. Gifts less than $50 will be redirected to the United Way Community Fund.

◯ Please release my name and address to the nonprofit listed above.

100% TOTAL

STEP 4 — My Signature

Signature: Date:

Email completed form to abeck@tcuw.org (completed PDF will attach to email)

Thank you! Together, we fight for the health, education and financial stability for EVERY person in our community.

Payroll Deduction Calculator

United Way Community Campaign

Depending on how much you donate through an automatic payroll deduction and what type of pay schedule your company uses, here is a breakdown of per-paycheck contributions:

Weekly (52 paychecks)	Every 2 Weeks (26 Paychecks)	Twice a Month (24 Paychecks)	Once a Month (12 Paychecks)	Total Gift
$50	$100	$108.33	$216.66	$2,600
$30	$60	$65.00	$130.00	$1,560
$25	$50	$54.17	$108.33	$1,300
$20	$40	$43.33	$86.66	$1,040
$15	$30	$32.50	$65.00	$780
$10	$20	$21.67	$43.33	$520
$5	$10	$10.83	$21.66	$260
$2.50	$5	$5.42	$10.83	$130

Harvest Club

Leadership Giving Levels

I would like to be a Harvest Club Donor. Please recognize me(us) in the following category:

◯ Harvest Club ..... $1,000+ ◯ Cream of the Crop..... $5,000+

To combine your gift with a spouse or partner for Harvest Club giving, please include his/her name below:

Mr/Ms/Dr First Name MI Last Name Jr/Sr

Please PRINT your name(s) as you would like to be recognized:

United Way
Twin County United Way