PLEASE RETAIN A COPY FOR TAX PURPOSES.

1 ABOUT ME: (PLEASE PRINT) Name	Date	United Way
Preferred Contact Address Preferred Phone Employer Email Address	City Zip	United Way of Saginaw County 100 S. Jefferson Avenue ■ 3rd Floor Saginaw, Michigan 48607 T 989.755.0505 ■ F 989.755.2158 www.unitedwaysaginaw.org
2 MY TOTAL GIFT TO THE COMMU	JNITY IS: \$	
PAYROLL DEDUCTION I authorize my employer to deduct my contribution per pay period. \$5 \$10 \$5 \$10 \$25 \$50 Other \$ I am paid: Weekly (52 times per year) Every 2 weeks (26 times per year) Twice per month (24 times per year) Monthly (12 times per year) Please sign as a confirmation of your gift.		BILL ME BILL ME Charge Card CR CR CR CR CR CR CR CR CR C
NO GOODS OR SERVICES WERE GIVEN IN EXCHANGE FOR THIS CONTRIBUTION.		
3 LEADERSHIP GIVERS:	United Way Tocqueville Society (Annual Gift of \$10,000 +) Labor Leads Gift: Bronze (Annual Gift of \$250 +) Silver (Annual Gift of \$500 +)	Please include my spouse's donation with my gift. Spouse Name

- . Gold (Annual Gift of \$2,500 +) _____ Gold (Annual Gift of \$750 +)
 - ____ Platinum (Annual Gift of \$1,000 +)
- Spouse Employer

THANK YOU FOR YOUR INVESTMENT IN OUR COMMUNITY!

Platinum (Annual Gift of \$5,000 +)

