

## United Way of Greater Waterbury

100 North Elm Street, 2nd Fl. Waterbury, CT 06702 (203) 757-9855 www.unitedwaygw.org

## Print BOLDLY and legibly on this form using a BLUE or BLACK INK PEN. ONLY complete this section if information listed above is INCORRECT/MISSING.

| DDEETY                               |  |   |                         |
|--------------------------------------|--|---|-------------------------|
| PREFIX                               | FIRST NAME   | M.I. LAST NAME  | SUFFIX                  |
| STREET AD                            | DRESS:  home address (p  | referred) 🗍 business address  | APT. #                  |
|                                      |  |   |                         |
| CITY                                 |  | STATE ZIP CODE PHONE: □   | cell  home work         |
|                                      |  |   |                         |
| _                                    | nome work providing your   | e-mail helps United Way reduce postage expenses   | For United Way Use Only |
| My Metho                             | od Of Payment:   |   |                         |
| ☐ Payroll                            | Deduction  | □ <td< td=""><td>Annual Payroll Gift</td></td<> | Annual Payroll Gift     |
| ☐ Cash                               | ,  | ttach check payable to United Way of Greater Waterbury  |                         |
| _                                    | e (\$100 Minimum)  |   |                         |
| _                                    | •  | e forwarded to you at email/address above)  |                         |
| ☐ *Credit                            | : Card (\$50 Minimum / Vis   | a, Mastercard and American Express)   |                         |
| CARD #                               |  | EXPIRATION BILLING ZIP CODE :  DATE (MM/YY)   | 3 OR 4 DIGIT CVV #      |
| X                                    |  |   | sh all details of my    |
| IMPOR                                | TANT: SIGN HERE  | <b>DATE</b> gift t  | to remain anonymous     |
| ☐ I am in<br>☐ I am in<br>I am a loy | nterested in volunteering<br>nterested in joining Emero<br>val contributor of United V | ited Way's work in:   | 25 years or more        |

## THANK YOU FOR YOUR GIFT!

| OPTIONAL: I wish to designate a portion  | of my gift (\$52 or more) to the non-profit organization(s) with 501(c)(3) status   |
|--|---|
| as I have listed below.  A   |   |
| **NON-PROFIT AGENCY NUMBER  STREET ADDRESS   | NON-PROFIT (FULL NAME)  |
| CITY / STATE / ZIP   | TOTAL DESIGNATION *MIN. \$52.00   |
| B  | NON-PROFIT (FULL NAME)  |
| STREET ADDRESS   |   |
| CITY / STATE / ZIP   | TOTAL DESIGNATION *MIN. \$52.00   |
| C  | NON-PROFIT (FULL NAME)  |
| STREET ADDRESS   |   |
| CITY / STATE / ZIP   | TOTAL DESIGNATION *MIN. \$52.00   |
| *All designations less than \$52 will be inves  **Non-Profit Agency Codes are available at | sted locally through the United Way of Greater Waterbury bit.ly/UWGW-Codes. If you cannot find your agency listed, please provide the |

agency's name and address (street, city and state)