

I WANT TO MAKE A DIFFERENCE IN MY COMMUNITY



United Way of
Benton & Franklin Counties

1 CONTACT INFORMATION

First Name _____ M.I. _____ Last Name _____
Personal Email _____ Personal Phone _____
Home Address _____ City _____ State _____ Zip _____
Employer _____ Employee ID Number _____
Year of Birth _____ I am retiring in the near future. Expected Date _____

2 RECOGNITION

What name should we use to thank you? _____
_____ Spouse/Partner Name _____
_____ Spouse/Partner Employer _____
 I do not wish to have my/our name(s) used for recognition purposes

Combine my United Way gift with my spouse/partner:

3 MY DONATION OPTIONS

TOTAL ANNUAL GIFT OF \$ _____

A EASY PAYROLL DEDUCTION

Amount per pay period \$ _____

Your pay period(s):

- Weekly (52/year)
- Bi-Weekly (26/year)
- Semi-Monthly (24/year)
- Monthly (12/year)
- One Time
- Other _____

B DIRECT GIFT

Amount per payment \$ _____

Number of payments per year:

- Monthly starting _____ / _____ (month/yr)
- Quarterly starting _____ / _____ (month/yr)
- One time in _____ / _____ (month/yr)

My payment method:

- Cash/Check Check # _____ Date _____
- Credit Card # _____
Exp Date _____ Security Code _____
- Automatic Bank Withdrawal
Routing # _____
Account # _____

C BILL ME

Amount per payment \$ _____

- Monthly
- Quarterly

*If different than above,
please list billing address:

Address

City/ State/ Zip



Signature (required to authorize deductions/designations) _____ Date: _____

We only use contact information to process gifts and to tell you about community impact; We will not share it. Your donation is tax-deductible— please save your copy. No goods or services were provided in exchange for this contribution.

OPTIONAL

You can choose your preferred donation area(s) by checking the box(es) below. If no selections are made, your gift is invested where it's needed most in our community.

Invest my donation to help the area of greatest need in our community

Please distribute my gift as follows:

EDUCATION

\$ _____/Year

Helping kids succeed by educating parents, preparing children for kindergarten, and increasing high school graduation rates.

HEALTH

\$ _____/Year

Increasing access to physical and mental health care, and supporting our vulnerable populations.

FINANCIAL STABILITY

\$ _____/Year

Building independence by providing the support and training that leads people toward financial stability.

BASIC NEEDS

\$ _____/Year

Working to fight hunger and homelessness, meet fundamental needs, and eliminate violence.

Designate to the 501(c)3 organization(s) below w.
 I do not wish to have my/our name(s) released to chosen agencies.

Agency Name _____ City _____ State _____ \$ _____ Year
Agency Name _____ City _____ State _____ \$ _____ Year

THANK YOU!

What difference will YOU make?

Join us in improving lives in Benton & Franklin Counties!

Your gift has a lasting impact on the education, health, basic needs, and financial stability of everyone in our community. Payroll deduction and automatic credit card payments are easy option, but one-time gifts are also welcomed. These are examples of what your annual gift can do.

When you choose automatic deductions from your paycheck or a credit card.

EDUCATION



HEALTH



BASIC NEEDS



FINANCIAL STABILITY



Your Pay Period	Donated from each paycheck	Your Total annual Gift
Weekly (52/yr)	\$2	\$104
Bi-Weekly (26/yr)	\$4	\$104
Semi-Monthly (24/yr)	\$5	\$120
Monthly (12/yr)	\$9	\$108
LEADERSHIP LEVEL		
Weekly	\$10	\$520
Bi-Weekly	\$20	\$520
Semi-Monthly	\$21	\$504
Monthly	\$42	\$504
VISIONARY LEVEL		
Weekly	\$15	\$780
Bi-Weekly	\$29	\$754
Semi-Monthly	\$32	\$768
Monthly	\$63	\$756
ALEXIS DE TOCQUEVILLE SOCIETY		
Weekly	\$193	\$10,036
Bi-Weekly	\$385	\$10,010
Semi-Monthly	\$417	\$10,008
Monthly	\$834	\$10,008

YOU COULD PROVIDE

10 Problem-solving puzzles for pre-schoolers

OR

2 Deliveries of medical equipment to an ALS patient's home

OR

2 Weeks of warm, prepared meals for a local senior

OR

1 Job skills training course to gain employment

YOU COULD PROVIDE

1 College visit for six refugee high school students

OR

16 Handheld magnifiers for those with low-vision

OR

6 Nights of shelter for those fleeing domestic violence

OR

5 Job skills training courses to gain employment

YOU COULD PROVIDE

15 Low-income children with art supplies

OR

50 Therapy session for survivors of sex trafficking

OR

4 One-on-one support sessions for people with disabilities to obtain housing

OR

9 Job skills training courses to gain employment

YOU COULD PROVIDE

1 Year of supportive housing for a homeless youth

OR

4 4x8 garden plots to provide 400 lbs. of fresh produce for low-income seniors

OR

30 Shopping and cooking classes for low-income people with disabilities

OR

50 Domestic violence survivors with documents and fees required for stable housing

YOU COULD PROVIDE

4 Families with one year of grief support after losing a loved one

OR

1 Year of dance classes and staff support for those with disabilities

OR

156 Homeless individuals with a sleeping bag, insulated work gloves, and socks

OR

7 Domestic violence survivors with the resources to get into stable housing

YOU COULD PROVIDE

20 Girls with four weeks of self-esteem building summer camp

OR

12 Weeks of therapeutic horse riding sessions for 26 youth with disabilities

OR

50,000 Healthy meals for hungry children and adults

OR

15 Domestic violence survivors with resources to get into stable housing

Want to help in every category? **Select areas of greatest need on the front.** Your donation will do just that— change lives in areas where it is needed the most.

**BECAUSE OF YOU
THERE IS A WAY**



United Way of Benton & Franklin Counties

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