

Pledge Form

Please complete the required information so we may properly record your gift.
(Your privacy is important to us. Your information will not be sold or used in any unauthorized way.)

United Way of Metro Chicago



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YOUR INFORMATION

NAME	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS.	FIRST	MI	LAST
HOME ADDRESS				BIRTHDATE (MM/DD/YYYY) / /
CITY				STATE ZIP
PREFERRED PHONE	<input type="checkbox"/> MOBILE <input type="checkbox"/> HOME <input type="checkbox"/> WORK			
PERSONAL EMAIL			WORK EMAIL	
COMPANY			TITLE	

YES, I want to receive United Way's e-newsletter featuring inspiring stories and ways to get involved in building back a stronger Chicago Region.

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YOUR CONTRIBUTION

My Pledge to United Way Please indicate how you would like to designate your gift below.

\$10,000 Tocqueville Society \$5,000 Leadership Gifts \$2,500 \$1,000 \$500 \$250 \$100 Other \$ _____

United Way of Metro Chicago Regional Recovery Effort

_____% **YES**, I want to support our local communities in meeting the basic needs of people affected by the COVID-19 pandemic.

United Way Neighborhood Network Initiative

_____% **YES**, I want to ensure systems, opportunities, and outcomes are rebuilt equitably across neighborhoods that are primarily Black and Brown.



Through the **Strong Neighborhoods Challenge Grant** Nicor Gas will match \$1 for \$1 any donation directed to the Neighborhood Networks Initiative, up to \$65,000.

_____% Please send my donation to the 501(c)(3) nonprofit agency below. (An 8% fee applies to cover processing and distribution costs)

AGENCY NAME _____ PHONE # _____ EIN # _____ (required)
ADDRESS _____ CITY _____ STATE _____ ZIP _____

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PAYMENT OPTIONS

Payroll Deduction

\$ [] [] [] per pay period x [] pay periods = total gift.

Credit/Debit Card

Make a secure credit card donation at LIVEUNITEDchicago.org/donate or call 312.906.2204, and submit this form to the appropriate person in your office.

Check

Personal check made payable to **United Way of Metro Chicago** (remit to address below).

Securities/Stock

Contact Mary Pat Rooney at marypat.rooney@LIVEUNITEDchicago.org or 312.906.2238 with questions

Matching Gift (Note here and contact your company's Human Resources department for necessary documentation.)

Your gift can make all the difference

CTA SINGLE RIDE VENTRA TICKET OR \$3 per week
A meal for a homeless neighbor

2 TO-GO COFFEES OR \$8 per month
A laptop for a kid who needs access to remote learning

MONTHLY FILL-UP OR \$50 per month
A month of home-visiting services for a 3-year-old

30-DAY CTA PASS OR \$100 per month
Legal services for a survivor of domestic violence or elder abuse

DOWNTOWN PARKING OR \$200 per month
12 COVID doctor's visits

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ACKNOWLEDGMENT

Please list my/our name(s) as: (Examples: Mr. and Mrs. John Doe or John and Jane Doe)

Please recognize my gift as "Anonymous."

Please combine my gift with my **spouse/partner's gift**.

NAME _____ AMOUNT \$ _____

EMPLOYER _____

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SIGNATURE

SIGNATURE Required

DATE

TRACKING CODE: P F D

Thank You!

GIVE. ADVOCATE. VOLUNTEER.
LIVEUNITEDchicago.org

United Way of Metro Chicago
231196 Momentum Place, Chicago, IL 60689-5311

2020/2021