

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				

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YOUR CONTRIBUTION

My Pledge to United Way of Metro Chicago

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 \$ _____

Basic Needs Support

_____ % **YES**, I want to support our neighbors with food assistance, access to healthcare, housing, safety from abuse, legal assistance, early learning, and workforce development.

Neighborhood Network Initiative

_____ % **YES**, I want to help reverse decades of disinvestment in Black and Latiné communities and ensure that a zip code doesn't determine health, economic, and education outcomes.

United Neighborhoods Equity Fund

_____ % **YES**, I want to support the cohort-based initiative providing unrestricted funds, capacity building, and sustaining support to small, BIPOC-led (Black, Indigenous, People of Color) organizations on the South and West Sides of Chicago and in the south suburbs.

_____ % Please send my donation to the 501(c)(3) nonprofit agency below. **(All fields are required. An 8% fee is applied to cover processing & distribution costs.)**

AGENCY NAME _____ PHONE # _____ EIN # _____
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

Contact your company's Human Resources department or visit LIVEUNITEDchicago.org/employee-matching-gifts to learn more.

Company Name _____

Your gift can make all the difference

\$10 per month
A laptop for a student to access online lessons.

\$50 per month
Up to 1,800 meals for families struggling to put food on the table.

\$100 per month
Job readiness services for five people seeking employment.

\$200 per month
12 primary care 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

Thank You!

UNITED, WE ARE BUILDING A STRONGER, MORE EQUITABLE CHICAGO REGION.
LIVEUNITEDchicago.org

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

2023/2024

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