

GIVE



STEP #1

Tell Us About Yourself (Please print within the boxes with BLACK ink.)

Mr. Mrs. Ms. First Name _____ M.I. Last Name _____

Personal Email Address _____ Birth Year _____ Retired Reserves Spouse
Military Affiliation _____

Home Address _____

City _____ State _____ Zip Code _____

Current Employer _____ Employee ID # _____

Loyal Donor
How many years have you contributed to United Way? _____ Years

STEP #2

Help Us Change Lives

CONSIDER THIS:
AN ADDITIONAL

\$5^AWEEK

WILL HELP A FAMILY IN CRISIS

A Direct Gift \$ _____

Cash or Check Check #: _____ Date: / /

For credit card gifts (one time or recurring), please call (352) 795- 5483

Please Bill Me at Home (begins in January) Quarterly
(Minimum Pledge of \$500 is required for BILL ME) Annually

Optional: I'd like my gift to specifically support United Way's work with:

EDUCATION



Creating opportunities for children and adults to achieve their greatest potential.

INCOME



Improving financial stability through job skills, budget training & other programs.

HEALTH



Developing healthy children & families by encouraging active lifestyles and healthy decisions.

HOMELESSNESS



Addressing immediate needs, like food and shelter, while coaching toward self-sufficiency.

VETERANS



Helping veterans and military families get the help they need through Mission United.

CRISIS



Providing emergency assistance 24/7 for suicide prevention, mental health counseling, & connection with support programs in crisis situations.

\$ _____

Designations (a minimum of \$52 each) may also be donated to another United Way, a specific United Way of Citrus County Partner/Contract Agency or to any other 501(c)(3) organization. Designations with incomplete or inaccurate information will be disbursed through Community Investment.

Designation \$ _____
 Please do not release my name to the organization designated above.
 I do not wish to be acknowledged for my designated gift.

Agency Code _____
Agency Name _____
Agency Address _____

STEP #3

Give Us Your Signature

Thank You

Sign Here:

_____ (required for all gifts)

Date / /

No, thank you. I do not wish to give.