## **TELL US ABOUT YOURSELF**

Mr/Mrs/Ms/Dr			
(Circle One) First Name	MI Las	st Name	
Employer Name		Email Address (Get updates on how your gift is being used and our monthly newsletter.)	
Home Address	City	State Zip Code	
Phone Number D Home	Mobile     Spouse/Par     (Why do we ask	pile Spouse/Partner & Employer (Why do we ask? So we can thank you as a couple for your combined gift.)	
Why do we ask? So we can make su	e the last time I gave. My former employer is re we are keeping an accurate record of your gifts. been giving to United Way for 10 years or mo mation or share with third parties. Visit liveunitedlu		
MAKE YOUR G			
PAYROLL e	BANK DRAFT	BILL ME	
I want to give:	I want to give \$ mon	thly Amount \$	
□ \$200 □ \$100	Continue an existing draft	□ Once □ Monthly	
	□ 1st time draft or account cha	inge of	
□ \$10  □ \$5	existing draft (Please attach a vo	bided check)	
□ Other \$	CREDIT/DEBIT/PAYPAL	Make your ONE TIME GIFT	
Per pay period		gift now	
<b>Or</b> $\square 1^{\circ}$ of my applied colory	Make your gift online at liveunitedlubbock.org/give or	Amount \$	
<ul> <li>□ 1% of my annual salary</li> <li>□ 1 hour of pay per month</li> </ul>	text <b>lubbockgives</b> to 41444.	Attached 🗆 Cash 🗆 Che	
		Check #	
Giving is a voluntary, persona	nl decision. Visit liveunitedlubbock.org/vo	oluntary-giving for our Voluntary Giving Policy.	

Lubbock Area United Way

<b>SIGNATURE</b> (Required to process pledge)	I prefer to remain anonymous	TOTAL GIFT:
X	Date:	ć
OPTIONAL: I WOULD LIKE	MY GIFT TO SUPPORT	Ş
	rou wish to designate a gift you may select up to two options below. Ea es for your donation, ensuring agencies get the maximum benefit of you	
<b>AREA OF GREATEST NEED</b>		
Giving to the United Way Community Fund is a p	owerful way to invest in our community and help the most people.	Amount \$
A COMMUNITY PARTNER Give directly to a United Way Community Partne I prefer not to share my contact information a	r. (See a complete list on the back of the form) and gift amount with the community partner(s).	
Community Partner Name		Amount \$
Community Partner Name		Amount \$
		Amount \$

Thank you for your gift to United Way. Your gift is tax deductible. Please keep a copy of this form for your records. Lubbock Area United Way does not provide goods or services as whole or partial consideration for any contribution. Designated gifts are assessed a fee for fundraising and processing costs in accordance with United Way Worldwide membership standards.

## **OUR COMMUNITY PARTNERS**





#### ECONOMIC MOBILITY

Create opportunities to move households towards financial stability.



#### **CONFRONTING VIOLENCE**

Support local prevention efforts and access to services for victims of child abuse and neglect, sex trafficking, and family violence.



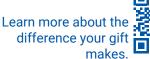
#### **EDUCATION**

Increase access to educational programs and materials to promote literacy and educational attainment for people of all ages.



#### **MENTAL HEALTH**

Advocate for local access to quality mental health services and supports.





# **THANK YOU!** #liveunitedLBK

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