

# 2021 DONATION FORM



## 1. My Information

MR / MS / OTHER <small>(Circle One)</small>	FIRST <small>(required)</small>	MIDDLE	LAST <small>(required)</small>	SUFFIX
EMPLOYER		DEPARTMENT		WORK PHONE
HOME ADDRESS <small>(required)</small>				CELL PHONE
CITY <small>(required)</small>		STATE <small>(required)</small>	ZIP <small>(required)</small>	BIRTHDAY / /
PERSONAL EMAIL <small>(required)</small>			WORK EMAIL	
OPTIONAL: Combine my gift with my spouse/partner Spouse/Partner Name: _____ Spouse/Partner Employer: _____			OPTIONAL - For Public Recognition <input type="checkbox"/> Recognition Name(s): _____ <small>(i.e. Mr. and Mrs. Sample)</small> <input type="checkbox"/> I prefer that my donation remain anonymous	
OPTIONAL: I'd like to join one of the below affinity groups <input type="checkbox"/> Women United (annual donation of \$1,500+) <input type="checkbox"/> Young Leaders Society (under age 45, annual donation of \$300+)			OPTIONAL: I'm planning for the future I plan to retire on ____ / ____ / ____ <input type="checkbox"/> Please sign me up for your retirement living e-newsletter	

## 2. My Donation

### Option #1: PAYROLL DEDUCTION

A. Number of pay periods per year: \_\_\_\_\_

B. Amount per pay period:

- \$50  
 \$25  
 \$10  
 Other \$ \_\_\_\_\_

(AxB) = TOTAL ANNUAL PLEDGE

\$ \_\_\_\_\_

OR

### Option #2: PAY NOW

- Attach CASH or CHECK  
(check payable to United Way)

\$ \_\_\_\_\_

### Option #3: CREDIT CARD

*You can also donate by credit/debit card online at [www.unitedwaysb.org/give](http://www.unitedwaysb.org/give).*

- Charge credit card

A. Payment frequency:

- Monthly (12)  
 Quarterly (4)  
 One Time

(AxB) = TOTAL ANNUAL GIFT

\$ \_\_\_\_\_

B. Payment amount: \$ \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry: \_\_\_\_ / \_\_\_\_ Billing Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## 3. Signature

Date

# THE POWER OF YOUR DONATION

LIVE UNITED

Together, we enrich the lives of children and families across Santa Barbara County.

What you spend on a weekly basis can be used to make a big annual impact in our community!

## WEEKLY SPEND

## ANNUAL IMPACT



**\$4**  
cup of coffee

=



**4 CHILDREN**  
receive a free book every month



**\$10**  
dry cleaning

=



**1 STUDENT**  
uses online literacy tools throughout the year



**\$18**  
movie tickets

=



**2 PRE-SCHOOLERS**  
attend Kindergarten Success Institutes



**\$25**  
dinner out

=



**250 FAMILIES**  
receive free income tax assistance



**\$30**  
online purchase

=



**1 CHILD**  
receives a Fun in the Sun scholarship

**OPTIONAL:**  I would like to FOCUS my gift where the need is greatest in Santa Barbara County

OR **CHOOSE ONE** of the following designation options:

- Education: Help students improve school readiness and academic achievement (Code 733)
- Crisis Response & Recovery: Support crisis and disaster response and long-term recovery
- Financial Empowerment: Help promote financial stability and independence (Code 739)
- Give to a specific United Way program

Program Name: \_\_\_\_\_

- Give to another geographic area or 501(c)(3) nonprofit organization (**\$115 annual pledge minimum**)

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

To learn about our designation policy, visit [unitedwaysb.org/campaign-toolkit](http://unitedwaysb.org/campaign-toolkit). Designations to outside organizations may incur a processing fee.

No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2, or other employer document showing the amount withheld and paid. Consult your tax advisor for more information.