## I'M A CHANGEMAKER.

## PLEASE COMPLETE THIS FORM AND RETURN IT TO YOUR EMPLOYEE CAMPAIGN MANAGER (KEEP A COPY FOR YOURSELF)

First Name	Last Name		-
Home Address			
City		State	Zip
Home Phone	Cell Phone		
Email Address			
Company Name	Work Phone		
My Total Gift AI  MY GIFT WILL BE PAID A	mount: \$		
☐ Payroll Deduction \$ ☐ Personal Check (Make	PER PAY AMOUNT NO. PAY PERIO	ODS (CIRCLE ONE) TOTAL GIF	Т
☐ Bill Me (\$50 minimum	))		
☐ Donated Securities (	Call 216.436.2151 to tra	nsfer funds)	
☐ Credit CardVisa	Mastercard	DiscoverAmEx	
Account Number	<u>.                                    </u>	Exp. Date	
☐ Donate Online at Uni	tedWayCleveland.org/	/give	
Sign Here to Authorize Y	our Pledge	Date	

## **GIVING OPTIONS**

\$			
United Way of Greater Cleveland Investing your gift for the greatest need and the greatest impact.			
S			
United Way Community Hub for Basic Needs Food, clothing and shelter.			
\$			
United Way 211 Help Link			
Connecting our community			
to services they need 24/7.			
2			
Other			
Central			
ORGANIZATION NAME			
UNGANIZATION NAME			
Write in another United Way or local			
health or human service organization			

THANKYOUFORYOUR CONTRIBUTION. NO GOODS OR SERVICES WERE PROVIDED IN EXCHANGE FOR THIS CONTRIBUTION. ALLGIFTS ARETAX-DEDUCTIBLE TO THE EXTENT ALLOWED BY LAW. PLEASE VISIT UNITED WAYCLEVELAND. ORG/DESIGNATIONS TO VIEW OUR DESIGNATION POLICY.

not listed.