

How to Fill out my United Way Donor Form

We get it, the form looks a little daunting at first, but trust us, it's easy. Just follow the steps below to determine just what information you need to include.

Step 1

Start by telling us **who you are**, **who you work for** and **how we can get in touch with you**. This info is key. We do not share this with anyone. We use it only in the event you need to be contacted regarding the processing of your donation.

1 I believe in my community.

DONOR INFORMATION

Employer _____

Mr. Ms. Mrs. Miss. Dr. Other _____

Name _____
First Initial Last

Home Address _____

City _____ Province _____ Postal Code _____

Telephone (Home) _____

Telephone (Business) _____

Email _____

I would like to receive the United Way e-Newsletter "By the WAY..."

We recognize our donors.
Please list my name as follows:

Check box if you would prefer to remain anonymous.

Step 2

Tell us **how much you want to donate** and **how you plan to do it**. Please note: Payroll Deduction will be receipted on your T4 at year-end. Cash, Cheque & Credit Card donations will be processed at United Way during year-end.

2 I believe everyone has something to contribute.

METHOD OF PAYMENT

Payroll Deduction \$ _____ (Amount per pay) x _____ (# of pay periods) = \$ _____ (Total)

Cash \$ _____

Cheque \$ _____

Credit Card \$ _____

Visa MasterCard American Express

Bill my Credit Card: Once Monthly Quarterly

Credit Card # _____ Expiry (mm/yy) _____

Examples of donations for 26 pay periods:
\$5/pay = \$130
\$10/pay = \$260
\$20/pay = \$520

Please consider a Leadership Gift
\$40/pay = \$1,040

Total Donation Amount

Step 3

Tell us **where you wish to make your donation**. The first box indicates you would like to direct your donation to the United Way Community Fund. The second box indicates a division of your donation to 1, 2 or all 3 of United Way's specific focus areas. The 3rd box indicates you wish to make your donation to one or more specific registered charities.

IMPORTANT: If you opt to donate to a registered charity, you must include its charitable number to ensure the donation is designated correctly.

3 I believe that everyone needs help and everyone can offer help.

GIFT DISTRIBUTION

United Way of Newfoundland and Labrador empowers you, the donor, to designate your gift. Please indicate below how you would like to direct your gift.

\$ _____ to United Way of Newfoundland and Labrador's Community Fund for maximum impact
and/or

Divide my gift to support
United Way of Newfoundland and
Labrador's Focus Areas:

\$ _____

\$ _____

\$ _____

From Poverty to Possibility

- Moving people out of poverty
- Meeting basic human needs (Ex: food, shelter and jobs)

Healthy People, Strong Communities

- Improving access to social and health-related support services
- Supporting resident and community engagement

All that kids can be

- Improving access to early childhood learning and development programs
- Helping kids do well at school and complete high school
- Making the healthy transition into adulthood and post-secondary education

Please note that United Way is only able to monitor charitable organizations within our Community Fund recipients. If the information you provide is incomplete or if the charity does not have a charitable tax number granted by Canada Revenue Agency, your donation will be directed to United Way of Newfoundland & Labrador's Community Fund.

and/or

I would like to designate my gift to the following Registered Canadian Charitable Organization(s):

Organization _____ BN/Registration # _____ \$ _____

Organization _____ BN/Registration # _____ \$ _____

Visit www.cra.gc.ca/charities for a listing of charities.

Step 4

Sign and Date your sheet to approve the processing of your form.

4 I believe in possibility.

Donor's Signature _____ Date _____

United Way of Newfoundland and Labrador is committed to protecting your privacy. We do not sell our donor lists.

A tax receipt will be issued at the end of the year (prior to the February 28th deadline) for all donations of \$10 or more.

Step 5

If you're doing **Payroll Deduction**, this section should be filled out for your payroll department.

5 Fill out this section - Do not detach

For payroll deduction only, to be processed by your payroll office.

Name _____ First _____ Initial _____ Last _____

I authorize the deduction of \$ _____ x _____ pay periods for a total gift of \$ _____

Donor's Signature _____ Date _____