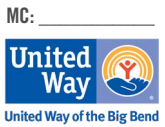




FSU UNITED WAY EMPLOYEE CAMPAIGN



1 MY INFORMATION

Your personal information is kept confidential and will not be sold or shared at any time.

Dr.
 Mr.
 Mrs.
 Ms.

FIRST NAME _____ M.I. _____ LAST NAME _____

PREFERRED NAME OR NICKNAME _____ HOME OR CELL PHONE _____ DATE OF BIRTH _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

WORK EMAIL ADDRESS _____ WORK PHONE _____

DEPARTMENT _____ EEMPLID _____

2 MY INVESTMENT IN MY COMMUNITY

Please select method of payment.

PAYROLL DEDUCTION \$ _____ per pay period # _____ pay periods = \$ _____

PAYMENT ENCLOSED Check (payable to United Way of the Big Bend) Cash \$ _____

CREDIT CARD _____ / _____ \$ _____
CREDIT CARD NUMBER 3- or 4-digit SECURITY CODE EXPIRATION MO/YR

BY QUARTERLY BILLING TO MY HOME ADDRESS \$ _____

TOTAL ANNUAL GIFT = \$ _____

3 RECOGNITION

My contribution qualifies me for the following: (check all that apply)

I am a **Leadership Giver** of \$1,000 or more individually or by total including spouse's gift.
 Spouse's Name _____ Spouse's Employer _____
 For recognition, please list my/our name(s) as follows _____
Please note that leadership giving is personal giving. Corporate gifts are not recognized as leadership gifts unless the company is wholly owned by an individual.

I am a **Loyal Contributor!** (I have contributed to a United Way for 10 years or more). Giving to United Way since _____ Year

LEADERSHIP SOCIETY (\$1,000 - \$4,999) TOCQUEVILLE SOCIETY (\$10,000 or more)
 A national society established to recognize the understanding, commitment and support of United Way's most generous and community-minded investors. This is UWBB's most prestigious group of local philanthropists.

COMMUNITY SOCIETY (\$5,000 - \$9,999)
 This society enables UWBB to recognize donors in the Big Bend who are willing to move to a major-gift level and make extraordinarily generous contributions to their community.

RETIRING Contact me to continue my annual gift. ENDOWMENT I want to make/ have made an endowment gift. ESTATE PLANNING I included United Way of the Big Bend in my will or Estate Plan.

I wish to remain anonymous.

4 AUTHORIZATION

If you would like to direct your donation, please complete Section 5.

SIGNATURE REQUIRED _____ Date _____

5 MY IMPACT

I WOULD LIKE MY GIFT TO SUPPORT:

OPTION A: Community Impact Fund

Allow volunteers to distribute funds to meet the most critical needs

OPTION B: 5 Community Outcomes

- Housing***
Increase access to dependable housing, sustainable utilities, and safe local neighborhoods
- Early Learning***
Increase family access to steady, affordable, and quality child care and education
- Safety Net***
Provide consistent safety net services during times of financial stress to both families and seniors
- Health and Mental Health***
Provide affordable health and mental health resources
- Skills Development***
Promote educational attainment and develop necessary skills to meet future employment needs and secure self-sustaining jobs

**Option B designations may be distributed via Option A in instances where there isn't a program for the selected designation.*

6 COUNTIES SERVED

I WOULD LIKE MY GIFT TO SUPPORT:

- Franklin Leon Taylor
- Gadsden Liberty Wakulla
- Jefferson Madison

7 VOLUNTEERING

I'm interested in learning more about:

- ReadingPals
- MathPals
- Volunteer Income Tax Assistance

8 GET INVOLVED

I'm interested in learning more about:

- Women United
- Emerging Leaders 365

Please return completed forms to Trivina Williams (tlwilliams2@fsu.edu) in Westcott - Office of the President, room 211 (MC:1470).

To comply with new IRS regulations, if you choose to contribute by payroll deduction, you must retain a copy of this pledge form in addition to your pay stub or W-2 Form to document your gift to UWBB, FIN #59-6011150. No goods or services have been given, in whole or part, for this contribution. Giving is a personal decision. United Way of the Big Bend has a strong policy against coercion. Whether a person gives to UWBB and how much the person chooses to give is up to the individual. Giving voluntarily is fundamental to the United Way concept. *A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE WITHIN THE STATE. (1-800-435-7352). REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE. **UNITED WAY OF THE BIG BEND RECEIVES 100 PERCENT OF YOUR CONTRIBUTION AND RETAINS OR DISTRIBUTES IT AS YOU DIRECT. REGISTRATION #CH583

United Way of the Big Bend
307 East Seventh Avenue
Tallahassee, FL 32303
telephone 850-414-0844
fax 850-414-0852

UWBB.ORG



United Way of the Big Bend

Your pledge will fund program partners whose outcome metrics improve the lives of those living in poverty and at the edge of poverty.

Economic Empowerment Through Workforce Enablement for Those at or Below The ALICE Threshold

3 GOALS

ACCESS



HOUSING

Increase access to dependable housing, sustainable utilities, and safe and local neighborhoods.



EARLY LEARNING

Increase families access to steady, affordable, and quality child care and education. *(to include elementary school age and below)*

STABILITY



SAFETY NET

Provide consistent safety net services during times of financial stress to both families and seniors.



HEALTH AND MENTAL HEALTH

Provide affordable health and mental health resources.

DEVELOPMENT



SKILLS DEVELOPMENT

Promote educational attainment and develop necessary skills to meet future employment needs and secure self-sustaining jobs.

5 O U T C O M E S