

# 1 CONTACT INFORMATION

DR. FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_  
EMPLOYER: \_\_\_\_\_ EMPLOYEE NUMBER: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
HOME EMAIL: \_\_\_\_\_ WORK EMAIL: \_\_\_\_\_

I am retiring soon, please contact me at home.

Tax receipt will be issued for gifts of \$20 or more. Payroll deductions are receipted on your T4.

# 2 HOW I'M BUILDING A STRONGER, MORE INCLUSIVE NORTHUMBERLAND COUNTY

My gift of \$ \_\_\_\_\_ will be paid by: (Please choose below)

## OPTION A

One time **◀OR▶**  Become a **GEM (Give Every Month)**:  
Monthly gift of \$ \_\_\_\_\_ on the:  
 1<sup>st</sup> or  15<sup>th</sup> of the month

## PAYMENT CHOICE

VISA  MASTERCARD  AMEX

Card number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

AUTOMATIC WITHDRAWAL: (Include VOID Cheque or complete):

Account#: \_\_\_\_\_ Transit#: \_\_\_\_\_

Institution#: \_\_\_\_\_

## OPTION B

Payroll deduction (beginning in January)  
I would like to contribute the following amount each pay:  
\$ \_\_\_\_\_ x \_\_\_\_\_ (no. of pays) = \$ \_\_\_\_\_  
**TOTAL**

## OPTION C

CHEQUE/CASH **\$ \_\_\_\_\_**  
**TOTAL**

Make cheque payable to:  
UNITED WAY NORTHUMBERLAND

**OPTION D**  Gift of securities by contacting United Way at (905) 372-6955 or toll free (800) 833-0002.

Signature (required for all payment methods) \_\_\_\_\_ Date \_\_\_\_\_

# 3 DONOR RECOGNITION\*

Please print your name as you would like it to appear in recognition materials: \_\_\_\_\_

Making a gift of \$1,200 or more annually distinguishes you as a Leadership donor.

**OR**  I request to remain anonymous in United Way recognition materials.

# 4 DONOR CHOICE

I WANT TO GIVE WHERE HELP IS NEEDED MOST.

I want to support the following United Way priorities:  KIDS  COMMUNITY  POVERTY REDUCTION

I would like a portion of my gift directed to another registered Canadian charity. \$ \_\_\_\_\_

Minimum donation to another charity is \$75. There is a 15% administration charge for designations with a maximum of \$500.

Name of Charity: \_\_\_\_\_ Location: \_\_\_\_\_

# 5 CREATE A LEGACY

I would like more information about:  Leaving a gift in my Will  I have included United Way in my Will