

Step 1 My Personal Information (Please print clearly)



LIVE UNITED

Rappahannock United Way

Last Year's Gift: \$

Mr./Mrs./Ms. First Name: _____ M.I. ____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____ Cell Phone: _____

Employer: _____

Employer ID #: _____

- I would like to remain anonymous.
- I would like to include RUW in my Will or Estate Plan.
- I would like to learn about volunteer opportunities.
- I would NOT like to receive RUW's e-Newsletter.

Are you a **Loyal Contributor**? I have been giving since _____ (Year).
(May include other United Ways. Years need not be consecutive.)

My gift, combined with my partner's, qualifies for membership in the Leadership Giving Circle.

Partner's Name _____

Partner's Employer _____

Recognition Name _____

(This is how you will be listed in the Leadership Giving Circle Brochure.)

Privacy Pledge

Rappahannock United Way does not sell, trade, or share your information with others. We will, however, use your contact information to communicate with you the good works that you are helping to achieve in our community. By providing your e-mail address, you are authorizing Rappahannock United Way to contact you via e-mail. You may opt out of these communications at any time.

Leadership Levels

A gift of \$1,000 or more qualifies for membership in our **Leadership Giving Circle (LGC)**:

- Community Builder** (\$1,000–\$1,749)
- Community Champion** (\$1,750–\$2,499)
- Community Investor** (\$2,500–\$4,999)
- Community Founder** (\$5,000–\$9,999)
- Tocqueville Society** (\$10,000 and Above)

Step 2 My Rappahannock United Way Investment (Please select a method of payment from the following)

Easy Payroll Deduction

A. My Pledge per pay period:

- \$50 \$25
- \$15 \$10
- \$5 \$3
- Other \$

B. To be Deducted:

- Weekly (52)
- Biweekly (26)
- Semimonthly (24)
- Other _____

C. **Total payroll deduction is A x B =**

Credit Card (\$50 Minimum. Must provide direct billing address above.)

Total Amount \$ _____

Card Number _____

Expiration Date _____

Security Code _____ (last 3 digits on back of credit card)

Bill My Credit Card: Monthly Quarterly Once on _____

- Visa
- Mastercard
- Discover

Bill Me At Home (\$50 Minimum)

Home address must be listed in Step 1.

Total amount \$ _____

Please bill me:

- Monthly Quarterly
- Once on _____

Cash/Check Attached

Total amount \$ _____

Check # _____

Make payable to: Rappahannock United Way

Stock/Securities

Total amount \$ _____

To facilitate your stock transaction, please call (540) 373-0041 ext. 311.

Step 3 Sign Here

Signature _____

Date _____

Work phone _____

No tangible benefit was received in exchange for this contribution unless specifically noted. Gifts made to Rappahannock United Way are tax deductible within the limits of the current law. Any cash contribution received by 12/31 will receive a tax letter from Rappahannock United Way. Letters will be mailed by 1/31. If you contribute through payroll deduction, you will not receive a tax receipt. Please retain a copy of this pledge form and your final pay stub to serve as proof of your donation for tax purposes.

THANK YOU

Thank you for investing in our community through Rappahannock United Way.

PFWP 07/2016

BE PART OF THE SOLUTION.

OUR MISSION.

To improve lives by mobilizing the caring power of our community.

OUR GOAL.

Our goal is to help more households emerge from poverty and achieve greater financial stability.

EDUCATION OUTCOMES

- Parents develop positive behaviors that support children (birth to age 5) in achieving developmental milestones.
- Children entering school demonstrate social readiness and literacy skills, knowledge and ability.
- Parents and students develop behaviors that demonstrate the value of education and lead to graduation.
- Individuals have the skills, qualifications and experience relevant to the changing workforce.



GIVE.

In our community, we are working every day to ensure every child has a quality education, every family has a stable income, and all people in our community enjoy good health. We need your support to continue our vital work.

GET CONNECTED. GET ANSWERS.

2-1-1 is an easy-to-remember phone number connecting people with free information on available community services. When you dial 2-1-1, a trained professional listens to your situation and suggests sources of help using one of the largest databases of health and human services in Virginia.

INCOME OUTCOMES

- Families and households sustain financial self-reliance through positive financial practices.
- Families and households sustain financial self-reliance by obtaining and maintaining employment.

BASIC NEEDS OUTCOMES

- Households below 200% federal poverty level obtain and maintain basic human needs.



ADVOCATE.

Rappahannock United Way has a key role to play in advocating for good public policy. Without community input, our priorities in EDUCATION, INCOME and HEALTH will lose critical government policy and funding support.

HEALTH OUTCOMES

- Parents nurture a healthy beginning to life by utilizing prenatal, well-baby and pediatric care for children up to 6 years old.
- Individuals and families manage the risk factors that contribute to chronic disease.
- Individuals will develop age appropriate skills and habits to avoid risky behaviors for themselves and create safe communities.



VOLUNTEER.

Want to give some of your time to make an impact in our community? Let Rappahannock United Way connect you with hundreds of volunteer opportunities in our area.

CALL (540) 373-0041
ruwvolunteer.org

2-1-1
VIRGINIA
24 HOURS A DAY
7 DAYS A WEEK

Ph. (540) 373-0041
Fax (540) 373-0356

Rappahannock United Way
3310 Shannon Park Drive
Fredericksburg, VA 22408
RappahannockUnitedWay.org

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