



## United Way of Southington

### **1. Personal Information**

Mr. Mrs. Ms. Dr. (Please circle one)

Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home #: \_\_\_\_\_ Alt #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Company: \_\_\_\_\_

### **2. Giving Options**

Direct my donation to the United Way of Southington

Additional Giving Options

-Agency Name: \_\_\_\_\_

-Address: \_\_\_\_\_

-Amount: \$ \_\_\_\_\_

### **3. Payment Options**

Payroll Deduction

\$ \_\_\_\_\_ Gift per pay period, X \_\_\_\_\_ # of pay periods = \$ \_\_\_\_\_ Total Annual Gift

Enclosed Amount: (Please select)  Cash  Check

Stock Securities (*We'll contact you to complete this transaction*)

Security Name: \_\_\_\_\_ Approximate Value: \_\_\_\_\_

Brokerage Firm: \_\_\_\_\_ # of Shares: \_\_\_\_\_

TOTAL GIFT: \$ \_\_\_\_\_

By signing here, I authorize the processing of this pledge & payment option selected:

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

My/spouse combined gift of \$250.00+ qualifies me/us for membership in the Leadership Giving Society.

Please list my/our names as follows:

\_\_\_\_\_

***No goods or services were given in exchange for this pledge.***