

1. Contact information

Mr. Ms. Mrs. Miss. Dr.

First Name _____ Initial _____ Last Name _____

Home address _____ City _____ Postal code _____

Home phone _____

Please indicate which e-mail to use for the United Way newsletter

Work phone _____ extension _____

Work e-mail _____

Cell phone _____

Personal e-mail _____

Employer _____

Department _____

Employee number _____

Union and Local _____

I will be retiring this year, please contact me at home after I retire on _____ date

2. How I want to invest

a. Payroll deduction*

* Notes: * The bottom portion of this form must also be completed if you select payroll deduction.
* Donations made by payroll deduction will be receipted on your annual T4 slip.

I authorize my employer to make deductions from my pay as follows:

\$ _____ X _____ = \$ _____
Amount # of pay periods Total donation

b. Pre-authorized bank withdrawal*

* Notes: * Please attach a voided cheque if you select pre-authorized bank withdrawals.
* A receipt will be issued at "tax time" for all donations made throughout the calendar year.

I authorize United Way to make withdrawals from my bank account as follows:

\$ _____ X _____ = \$ _____
Amount # of months Total donation

c. Credit Card*

* Note: * A receipt will be issued at "tax time" for all donations made throughout the calendar year.

I authorize United Way to bill my credit card as follows:

AMEX MasterCard VISA

Card number _____ Expiry date ____/____

for 12 consecutive months beginning in January. \$ _____

a one-time donation of..... \$ _____

a continuous donation \$ _____

I understand that this monthly donation will continue until I notify United Way of any changes.

d. Cash or cheque*

* Notes: * For cash and cheque donations a receipt will be issued when United Way processes this form.

Cash..... \$ _____ Cheque..... \$ _____

Post-dated cheques (Your receipt will be issued at "tax time".)

\$ _____ X _____ = \$ _____
Amount of each cheque # of cheques Total donation

3. Leadership Investing Recognition Levels

- Founder.....\$10,000 to \$24,999
- Pacesetter.....\$5,000 to \$7,499
- Frontrunner.....\$3,500 to \$4,999
- Patron.....\$2,500 to \$3,499
- Builder.....\$1,500 to \$2,499
- Leader.....\$1,000 to \$1,499

- I authorize United Way to publicly recognize my Leadership Investment.
- I want to remain anonymous.

4. I would like to know more about...

- Reducing capital gains tax by making my donation through a gift of securities.
- Leaving a legacy through planned giving.
- Being remembered by designating United Way as a beneficiary of an RSP or life insurance policy.

5. Signature

Signature _____

Date _____



United Way / Centraide
Windsor - Essex County

Detach for your Payroll department

Payroll deduction authorization (to be submitted to your Payroll Department)

Name _____

Department _____

Employee number _____

Signature _____

Date _____

I authorize my employer to make deductions from my pay for United Way as follows:

\$ _____ X _____ = \$ _____
Amount # of pay periods Total donation

