



UNITED WAY OTTAWA 363 Coventry Road, Ottawa (ONTARIO) K1K 2C5 T 613.228.6700 F 613.228.6730 unitedwayottawa.ca DONOR ID # OFFICE USE ONLY

DATE 20120901 GENDER M F YEAR OF BIRTH 1978 BN 108 160 250 RR0001

MR. MS. MRS. DR. NAME JANE FIRST NAME | SMITH LAST NAME

ADDRESS 555 Sample Street CITY Ottawa PROV. ON POSTAL CODE K1K 1K1

TEL: H(613) 555-5555 W()

E-MAIL sample@sample.com

EMPLOYER Sample Company EMPLOYEE # _____ I will be retiring in the next year.

LANGUAGE PREFERENCE ENGLISH FRENCH PREFERRED METHOD OF COMMUNICATION E-MAIL TELEPHONE MAIL DO NOT CONTACT

Donors who give \$1,000 or more are distinguished as United Way Leaders. If you are giving at the Leadership level, may we recognize your gift by publishing your name in our United Way Honour Roll? Yes No

If yes, please print name(s) as you would like it to appear in printed materials _____

HOW YOUR GIFT CAN MAKE CHANGE HAPPEN

\$45 per pay helps get a teenage girl off the streets and into a shelter where she'll get the counseling and support she needs to turn her life around.

\$20 per pay provides a child struggling in school with access to a homework program — giving them the chance to succeed in school and in life.

\$10 per pay provides an isolated senior with social and recreational activities helping them stay active and connected to their community.

LEADERSHIP GIVING
HOW MUCH DOES IT REALLY COST? (based on 26 pay periods)

	Leadership Gift			Major Donor	
TOTAL GIFT →	\$1040	\$1560	\$2600	\$5200	\$6500
COST/PAY PRE-TAX →	\$40	\$60	\$100	\$200	\$250
COST/PAY AFTER TAX* →	\$25.48	\$37.45	\$61.39	\$121.23	\$151.15

*Average for Ontario

For more information please visit unitedwayottawa.ca

1 I WANT TO MAKE CHANGE HAPPEN BY GIVING TO:

UNITED WAY OTTAWA Please invest my donation where it's needed the most and will have the greatest impact. \$ _____

OR Please direct my donation to the following priority(-ies):

<input type="checkbox"/> Help people living with mental health issues	\$ _____	<input type="checkbox"/> Improve work opportunities for people with disabilities	\$ _____
<input type="checkbox"/> Help vulnerable children and youth succeed	\$ _____	<input type="checkbox"/> Support people in crisis	\$ _____
<input type="checkbox"/> End homelessness	\$ _____	<input type="checkbox"/> Strengthen employment opportunities for new Canadians	\$ _____
<input type="checkbox"/> Help seniors live independently	\$ _____	<input type="checkbox"/> Build strong communities	\$ _____
<input type="checkbox"/> Overcome teen addiction	\$ _____		

I want to invest in United Way of: Centraide Outaouais (Gatineau) Prescott-Russell Leeds and Grenville Lanark \$ _____

I want to designate my gift to another registered Canadian charity* (a minimum gift of \$26/charity is required for this option):
Exact name of charity and BN/REGISTRATION # Ottawa Network for Education / 119071280RR0001 \$ 500.00

* United Way Ottawa is committed to donor privacy. Personal information is not shared without written authorization or unless required by law. Visit www.unitedwayottawa.ca/english/privacy.php.

Please share my name and the amount of my gift with the organization(s) listed above. Should you choose to share this information, United Way will not be able to ensure your donor privacy.

Please do not share my information.

Receipting: Gifts made through payroll deduction will appear on your T4. For all other methods of giving, receipts are automatically issued for gifts of \$20 or more.

Thank you **TOTAL GIFT**
\$ 500.00

2 THIS IS HOW I WANT TO MAKE MY DONATION:

PAYROLL DEDUCTION Deduct \$ _____ X _____ = \$ ANNUAL TOTAL
Gifts will appear on your T4 slip — complete tear-off section below.

CASH OR CHEQUE (ATTACH CASH OR CHEQUE(S)) Cheque # 000 Cheque date Oct 1, 2012 \$ 500.00 TOTAL
Make cheque(s) payable to United Way Ottawa.

CREDIT CARD Receipts will be issued after final payment. Visa MC Amex
 Monthly gift in the amount of \$ _____ for 12 consecutive months beginning Jan. 15 One-time gift \$ CREDIT CARD TOTAL

_____ card number _____ expiry date mm/yy _____ signature

OTHER GIVING OPTIONS If you would like more information about making a gift of stock, life insurance, bequests or named endowment funds, please contact us at 613-228-6767. I have included United Way Ottawa in my will.

Proudly sponsored by: **mbna**

ATTENTION **DONOR:** If you made your gift through payroll deduction, please fill out this section. **EMPLOYEE CAMPAIGN COORDINATOR:** Please detach and process with your payroll department.

NAME _____

EMPLOYER _____ EMPLOYEE # _____

DEPARTMENT _____

I authorize my employer to deduct \$ _____ X _____ pay periods, for a total gift of \$ _____ (amount should match TOTAL GIFT above)

X _____ Date _____
Donor's signature