



UNITED WAY

Greater Milwaukee & Waukesha County

PLEDGE FORM

United Way Pledge Processing
P.O. Box 88988, Milwaukee, WI 53288-8988
donor@unitedwaygmmc.org
414.267.8408

Please print clearly. Your information is kept confidential and will not be sold or shared.

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Mx. ☐ Dr. Name _____ Date of Birth ____/____/____

Home Address _____ City _____ State _____ Zip _____

Employer _____ Work Email _____

Phone (____) _____ ☐ Home ☐ Work ☐ Cell Personal Email _____

☐ Please email me the monthly United Way newsletter with updates and volunteer opportunities. ☐ I am retired.

MY INVESTMENT

United Way \$ _____

Support all Key Initiatives with comprehensive approaches to our community's biggest challenges and building a resilient community.

Reducing Barriers to Employment & Advancement \$ _____

Help individuals start stable careers. **New and increased gifts matched by ManpowerGroup (Up to \$200,000).**

Safe & Stable Homes: Housing Stability for All \$ _____

Keep families and individuals in their homes. **New and increased gifts matched by Landmark Credit Union (Up to \$50,000).**

Techquity \$ _____

Connect individuals and families to computers and digital skills. **New and increased gifts matched by EY (Up to \$25,000).**

Teen Mental Wellness: Empowering Minds \$ _____

Provide mental health resources and services to high school students. **New and increased gifts matched by Medical College of Wisconsin (Up to \$25,000).**

Mental Health Improvement Fund \$ _____

Invest in Milwaukee County mental health and substance use services for people of all ages. **New and increased gifts matched by the Milwaukee Health Care Partnership health systems (Up to \$2 million).**

Optional designated contribution to 501(c)(3) nonprofit of your choice.

Direct my gift to the following nonprofit..... \$ _____

Nonprofit Name _____

Address _____

If you wish to designate to additional nonprofits, please attach a list including name, address, and amount.

☐ Do not release my name to the nonprofit(s).

MY TOTAL ANNUAL GIFT \$ _____

PAYMENT OPTIONS (required)

☐ Payroll Deduction

Total annual gift will be divided across your pay periods.

☐ **Check** Payable to United Way

☐ **Credit Card** Start Date: ____/____/____

Charge me: ☐ Once ☐ Monthly
☐ Quarterly ☐ Semi-Annually

☐ Visa ☐ MasterCard ☐ Discover ☐ AmEx

_____ Exp _____

☐ **Bill Me** (\$10 Minimum) Start Date: ____/____/____

☐ Once ☐ Quarterly ☐ Semi-Annually

☐ **Stock or Retirement Account**

Call 414.263.8144 for more information.

COUNT ME IN!

A gift of \$1,200+ annually means you are a member of the Leadership Society! As a member, you can also join our Donor Networks.

☐ **Diversity Leadership Society:** Leaders working to close the gaps for our community's diverse populations ensuring every family has the opportunity to thrive.

☐ **Emerging Leaders:** Philanthropic leaders who serve collectively, connect meaningfully, and develop professionally.

☐ **Pride United:** LGBTQ+ leaders, allies, and advocates committed to addressing key issues disproportionately affecting the LGBTQ+ community.

☐ **Technology United:** Technology professionals leveraging innovation and influence to give back, get involved, and take action in our community.

☐ **Women United:** A powerful network of women who strengthen our community through an investment of talent, compassion, and philanthropy.

☐ **LINC:** Young professionals, ages 21-35, who experience the impact their generosity makes in our community through volunteering and special events. They give \$250+ annually.

☐ **Retire United:** Retirees who stay connected through meaningful volunteer and advocacy opportunities.

I AM A

- ☐ Loyal Contributor (10+ years of giving)
☐ Diamond Donor (25+ years of giving)

☐ I have included or am interested in including United Way in my will, trust, or estate plan.

Signature _____ Date _____

No goods or services were provided in exchange for this contribution. **Please keep a copy of this form for your tax records.** Payments made through payroll deduction also require a copy of your pay stub, W-2, or other employer document showing amount withheld. Consult your tax advisor for more information. Pledges will be matched July 1, 2026 to June 30, 2027 until the dollar values stated above have been met.

THANK YOU!