



Oshkosh Area  
United Way

21 W. New York Avenue  
Oshkosh, WI 54901  
920.235.8560

Win a 2022 Honda Civic donated by Bergstrom Automotive!

Any new, undesignated investment of at least \$60 or any undesignated investment that increased at least \$1 from last year's investment automatically qualifies you for one (1) entry in the drawing. ALL contact information including address, email and phone number must be provided on this form for eligibility. One entry per person. Pledge form must be received prior to December 31. Winner will be announced at OAUW's annual Community Celebration event. Visit oshkoshunitedway.org for full details.\*



## STEP 1: MY INFORMATION

Please print clearly. Your personal information is confidential and will never be sold or shared. All contact information required for car giveaway eligibility.

Mr.  Mrs.  Ms.  Dr. Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
FIRST NAME MIDDLE INITIAL LAST NAME MM/DD/YYYY

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone:  Home  Work  Cell \_\_\_\_\_ I would like to learn more about:  VolunteerOshkosh.org  
 Emerging Leaders  Dolly Parton Imagination Library  211

Email:  Personal  Work \_\_\_\_\_  Sign me up for the monthly OAUW eNewsletter

Employer: \_\_\_\_\_  Retiring within a year or on: \_\_\_\_\_  
MM/DD/YYYY

For recognition, please list my/our name(s) as follows: \_\_\_\_\_

I would like to be thanked for my donation  I do not wish to be thanked  I wish to remain anonymous CHECK ALL THAT APPLY

In honor  / Memory  of: \_\_\_\_\_

## STEP 2: MY INVESTMENT

### LEADERSHIP GIVING LEVELS

Emerging Leader: \$500+ (age 40 or younger)  
 Leadership Giver: \$500-\$9,999  
 Tocqueville Society: \$10,000+

#### PAYROLL DEDUCTION

I want to contribute the following amount per pay period:

\$100  \$60  \$52  \$25  \$10  Other: \$ \_\_\_\_\_ X \_\_\_\_\_ = \$ \_\_\_\_\_  
NUMBER OF PAY PERIODS PER YEAR TOTAL ANNUAL INVESTMENT

OR:  One time donation \$ \_\_\_\_\_

#### CREDIT CARD

Amount: \$ \_\_\_\_\_ Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Billing ZIP Code: \_\_\_\_\_

#### CASH OR CHECK

Amount: \$ \_\_\_\_\_ Check Number: \_\_\_\_\_ Date: \_\_\_\_\_ PAYABLE TO: OSHKOSH AREA UNITED WAY

#### BILL ME

Bill Me Amount: \$ \_\_\_\_\_  One-Time  Monthly  Quarterly Begin On: \_\_\_\_\_

## STEP 3: MY IMPACT

### PLEASE FOCUS MY INVESTMENT TO SUPPORT:

- Oshkosh Area United Way's General Fund - *the most powerful way to support your community!*
- Health  Financial Stability  Education
- Other: \_\_\_\_\_
- Please send me information about the Oshkosh Area United Way Legacy Endowment Fund.

## CHANGE BEGINS WITH YOU! THANK YOU FOR BEING A CHANGE-MAKER FOR OUR COMMUNITY!

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Pledge Information: Investments designated to out of area organizations and/or other United Ways are subject to a % administration fee. In accordance with IRS regulations, we acknowledge that no goods or services, in whole, or in part, were provided to United Way in exchange for this investment.