

DONOR INFORMATION

Mr./Ms. _____
 First Middle Initial Last Date of Birth

Home Address _____ City _____ State _____ Zip _____

Organization _____

Address _____ City _____ State _____ Zip _____

(_____) _____
 Phone Number Personal E-mail Address

How would you like your name to appear when recognized? _____

I would like my gift to remain anonymous.

MY INVESTMENT

Level of Giving:

- Order of Fraternity: \$75,000 - \$99,000
- Order of Equality: \$50,000 - \$74,999
- Order of Liberty: \$25,000 - \$49,999
- Order of Independence: \$15,000 - \$24,999
- Society Members: \$10,000 - \$14,999

Donate Online (Please visit: UnitedWayPBC.org/join-tocqueville-society)

Check (Payable to United Way of PBC) Amount \$ Check #

Stock/Securities (We will contact you with our procedures) \$

Credit Charge my card: MONTHLY \$ X 12 QUARTERLY \$ X 4 ONE TIME \$

TOTAL ANNUAL CHARGE \$ MasterCard AmEx Visa Discover

Credit Card # Security Code Exp date

Company Match Company name: _____ Amount: \$

Participating in Workplace Campaign Company name: _____

TOTAL Annual Pledge/Donation \$

Thank you!  **SIGN HERE**  _____ Date _____

SIGNATURE REQUIRED for all donations

OTHER GIVING OPPORTUNITIES

- I would like to speak with someone about establishing a **Donor Advised Fund**.
- I would like more information on **Planned Giving**.
- I have included United Way of Palm Beach County in my **Planned Giving**.