United Way Metro Chicago | United Way

AFRICAN AMERICAN INITIATIVE & LATINO INITIATIVE PLEDGE FORM

CELEBRATING 75 YEARS

Thank you for supporting United Way.

United Way of Metropolitan Chicago | 75 Remittance Drive, Suite 5828 | Chicago, IL 60675–5828

MY INFORMATION

NAME (please print)	FIRST	MI	LAST
HOME ADDRESS			
CITY		STATE	ZIP
PHONE	– –		
EMAIL			
EMPLOYER			
EMPLOYEE WORK LOCATION			

Please keep me informed via email about:

- ☐ How United Way is making an impact across Chicagoland
- ☐ United Way efforts in the African American community
- ☐ United Way efforts in the Latino community
- ☐ United Way efforts in the Asian Pacific American community
- ☐ Young Leaders Society (YLS)
- ☐ Volunteer opportunities
- ☐ Planned giving

THE UNITED WAY *AFRICAN AMERICAN INITIATIVE*

The United Way *African American Initiative* helps at-risk African American males, ages 10 to 16, transition successfully to adulthood in communities across Chicago. Lead agencies are working with community leaders, government and school officials, congregations and the youth themselves so that African American boys stay on track to graduation, understand employment options and assume healthy family and social roles.

BlueCross BlueShield of Illinois

BlueCross BlueShield of Illinois is matching, 2-to-1, new and increased contributions of $1,000 or more to the United Way *African American Initiative*. Ask your United Way representative for details.

THE UNITED WAY *LATINO INITIATIVE*

Earlier this year, United Way convened agency partners who serve the Latino community as well as a panel of experts comprised of corporations, educators, foundations and advocacy groups to develop the United Way *Latino Initiative*. The *Latino Initiative* will help Latino youth in our region develop an understanding of the value and long-term impact of staying in school, create a self-identity that bridges two cultures and assume healthy family and social roles.

ComEd. An Exelon Company

ComEd is matching, 2-to-1, new and increased contributions of $1,000 or more to the United Way *Latino Initiative*. Ask your United Way representative for details.

Please direct my gift as follows:

- ☐ 100% to the United Way *African American Initiative*
- ☐ 100% to the United Way *Latino Initiative*
- ________ % to the *African American Initiative*
- ________ % to the *Latino Initiative*
- ________ % to United Way of Metropolitan Chicago

THE UNITED WAY ENDOWMENT
IMPROVING LIVES IN METROPOLITAN CHICAGO FOR ANOTHER 75 YEARS

In addition to your support of the *African American Initiative* and *Latino Initiative*, please consider a gift to the United Way *Endowment*. The *Endowment* will provide resources for quick and effective response to unexpected crisis, stabilize human care service when resources are less available and serve as a source of revenue to address emerging needs. Please speak with your United Way representative or call 312.906.2457 for more information.

Please select payment method and enter total gift below.

☐ **PAYROLL DEDUCTION:** [ ].[ ] (amt. per pay period) X [ ] (# of pay periods) = [ ].[ ] (total gift) **OR** One-time payroll deduction of [ ].[ ]

☐ A **CHECK** (payable to **United Way**) is enclosed in the amount of [ ].[ ]

☐ **PLEASE CHARGE MY:** ☐ Visa ☐ MasterCard ☐ Discover ☐ AmEx ☐ Diners

in the amount of [ ].[ ]

Card # [ ]

Exp. [ ] / [ ] Bill my card after [ ] / [ ] / [ ]

Please select one: ☐ One-time payment ☐ Quarterly ☐ Monthly

MY TOTAL ANNUAL GIFT IS $ [ ],[ ].[ ]

MY AUTHORIZATION

Signature (required) Date

United Way is committed to protecting your privacy. Information that you provide is used to help in our campaign, respond to your requests for information and process your donation.

To donate by credit card over the phone or make a gift of stock, please call 312.906.2257 9am to 5pm Monday–Friday. For more information, visit www.uw-mc.org.

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7–116

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- ________ % to United Way of Metropolitan Chicago

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in the amount of ________ . ____

Card # ________________

Exp. ____ / ____ Bill my card after ____ / ____ / ____

Please select one: ☐ One-time payment ☐ Quarterly ☐ Monthly

MY TOTAL ANNUAL GIFT IS $ ____ , ______ . ____

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Signature (required) Date

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