

# MY COMMUNITY PLEDGE

## STEP 1 TELL US ABOUT YOURSELF

EMAIL ADDRESS EMPLOYER

PREFIX FIRST NAME M.I. LAST NAME

PERSONAL MAILING ADDRESS

CITY STATE ZIP CODE

## STEP 2 MAKE YOUR CONTRIBUTION

### PAYROLL DEDUCTION

\$100  \$20

\$50  \$10

\$30  \$5

**CUSTOM**

AMOUNT

x  PAY PERIODS PER YEAR

TOTAL ANNUAL DONATION

OR

### ONE TIME CONTRIBUTION

I HAVE ATTACHED

CASH  CHECK

CHECK NUMBER (if applicable)

AMOUNT

/  /

DATE

OR

### CHARGE MY DEBIT /CREDIT CARD

FREQUENCY

ONE TIME  MONTHLY  QUARTERLY  ANNUALLY

CREDIT/DEBIT CARD NUMBER

/  /

EXPIRATION DATE ZIP CODE CCV

## SIGNATURE (REQUIRED TO PROCESS PLEDGE)

X  DATE / /

- I PREFER TO REMAIN ANONYMOUS  YES, SIGN ME UP FOR THE E-NEWSLETTER TO SHOW HOW MY DONATION IS GETTING RESULTS  CONTACT ME ABOUT MAKING A PLANNED GIFT

## STEP 3 OPTIONAL: I WOULD LIKE MY GIFT TO SUPPORT...

THE AREA OF GREATEST NEED OR

HEALTH FINANCIAL STABILITY EDUCATION

\$  \$  \$  \$

I WOULD LIKE A SPECIFIC NON-PROFIT AGENCY TO RECEIVE MY GIFT (OPTIONAL):

\$

Please include: Agency Name, Address, and EIN if applicable. Minimum of \$150 per designated 501(C)3 agency.

## OPT IN LEGACY OF LEADERSHIP

I'M GIVING AN INDIVIDUAL OR COMBINED HOUSEHOLD GIFT OF \$500 OR MORE

AMOUNT

- TRAILBLAZER (\$5,000)
- PACESETTER (\$2,500)
- CHANGEMAKER (\$1,000)
- LEADERSHIP (\$500)

PLEASE COMBINE MY LEADERSHIP GIFT WITH THAT OF:

Name of person or organization (optional)

PLEASE LIST ME/US IN THE MEMBERSHIP DIRECTORY AS:

Name / Workplace Affiliation (optional)

I HAVE SUPPORTED UNITED WAY FOR \_\_\_\_\_ CONSECUTIVE YEARS



UNITED WAY OF SOUTHEASTERN IDAHO



# WHAT A DOLLAR BUYS

**\$5 PER PAYCHECK\***

**\$10 PER PAYCHECK\***

**\$20 PER PAYCHECK\***

**\$30 PER PAYCHECK\***

## HEALTH



Breakfast for 35 homeless shelter residents

32 nutritious meals for homebound seniors

2 complete dental exams for veterans in transitional housing

78 health and safety visits for homebound seniors

## FINANCIAL STABILITY



Utility assistance for 1 household

35 hours of job training for 2 individuals to learn new skills

1 tank of propane for rural residents to heat their home

104 nights of emergency shelter for those seeking safety

## EDUCATION



16 books for children healing from crisis situations

Financial assistance for afterschool activity fees for 5 students

School supplies for 5 children

Salary for children's program aide for 1 year

*\* based on a 26 pay period annual schedule*

## OUR WHY

**A.L.I.C.E. is at the heart of everything we do.**

(Asset Limited, Income Constrained, Employed)



### EDUCATION

We believe that early childhood education is critical to lifelong success.



### HEALTH

We believe that access to quality health care affects every aspect of life.



### FINANCIAL STABILITY

We believe in putting every member of our community on a path to financial stability.

