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Name Last 4 digits SSN Home Address City/State/Zip Phone Company Name (if applicable) Personal Email 2 My Gift to My Community (please choose one option) OPTION 1: Payroll Deduction OPTION 2: Cash Contribution Amount per pay period Total Annual gift to United Way Check if you request quarterly billing Credit card — Visit www.uwjc.org and click DONATE button Signature (please sip a authorize payroll deduction) If your gift is to be designated to a specific United Way or agency, please fill in the name of United Way or agency and amount. Without the address of the specific agency, designations cannot be processed. Designations made to organizations other than United Way of Johnson Country agencies will be changed a 14 percent fundanising and processing fee. United Way or Agency and Address Total Amount S Johnson Leadership Circle My gift qualifies me to participate in the Johnson Leadership Circle (5500 or more) Alexis deTocqueville (\$10,000 and up) Gold Circle (\$1,000 – \$1,1999) Please include my name in the Johnson Leadership Circle Prectory Please include my spouse's name	
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☐ Red Feather Circle (\$5,000 - \$9,999) ☐ Silver Circle (\$750 - \$999) ☐ Please include my spouse's company	Leadership Circle Directory
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4 How does your contribution help the community?	Leadership Circle Directory Please include my spouse's name
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per week provides a youth with a conflict resolution workshop. \$5 per week allows a preschool classroom teacher to purchase education supplies	Leadership Circle Directory Please include my spouse's name Please include my spouse's company

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per week assists a family with rental

assistance for one month preventing homelessness and providing stability to

the family.