INVEST IN OUR COMMUNITY TODAY!

2023-2024 Campaign



United Way of Idaho Falls & Bonneville County

First Name	Middle Initial	Last Name		
Home Address - Street	City		State	Zip Code
Email Address	Personal Phone	2	Work Phone	
Employer				tiring this year. e keep in touch
MY CONTRIBUTION				
🗆 EASY PAYROLL DE	DUCTION	🗆 GIFT ENCL	OSED	
I will contribute the following amount each pay period:		Please make checks payable to United Way of Idaho Falls and Bonneville County		
□ \$1 □ \$5 □ \$10 □ Other Amount \$			Check 🔲 Credit Car	
l am paid:				
□ Weekly (52) □Bi-\ □ Bi-Montly (24) □		Expires:		
		$\cap \land \land \land$		
Total Gift: \$	y gift with spouse/significant otl		year qualifies for me	mbership in the
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Total Gift: \$ My gift (please combine m. Jnited Way of Idaho Falls & Be Anonymous Gift SIGNATURE: NY IMPACT (Optional) COMMUNITY IMPACT FUND Make the greatest impact in our community Note: Designations may only be made to nor of Eastern Idaho. This includes all United Was 520 annually. United Way of Idaho Falls and	y gift with spouse/significant oth onneville County Leadership Ci	her) of \$500 or more per rcle. Names as they show H MS FINANCIAL STABILITY PROGRAMS	year qualifies for menula de published: DATE: e providing health and human a financia de la manumenta de la ma	service programs to th designated is a contril
Total Gift: \$ My gift (<i>please combine m</i> . Jnited Way of Idaho Falls & Be Anonymous Gift SIGNATURE: WY IMPACT (<i>Optional</i>) COMMUNITY IMPACT FUND Make the greatest impact in our community	y gift with spouse/significant other onneville County Leadership Ci EDUCATION PROGRAMS	her) of \$500 or more per rcle. Names as they show H MS FINANCIAL STABILITY PROGRAMS	year qualifies for menula de published: DATE: e providing health and human a financia de la manumenta de la ma	service programs to th designated is a contril
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Thank you for your contribution through the United Way campaign. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2, or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.