

PROVIDE HOPE WHERE IT'S NEEDED MOST
CHANGING LIVES, RIGHT HERE IN MIAMI. GIVE NOW.



Gift Card

Employee Name _____ Employee Number _____
 Employee Email _____ Work Location Number _____

Want to see how your contribution is making a difference? Please provide your personal email address so we can provide you with opportunities to stay informed and involved all year long. _____

Please select only one option under either Section 1, 2, 3 or 4, then fill out your method of payment.

1 Superintendent's Leadership Circle	2 Goal Busters																				
Individuals who make a gift of \$1,000 or more a year are considered members of the Superintendent's Leadership Circle and of United Way Miami's Leadership & Endowment Circle, and are invited to special events in recognition of their dedication to helping others. <input type="checkbox"/> \$1,000 <input type="checkbox"/> Greater than \$1,000 _____ (new amount) Fast track giving program The fast track program facilitates an individual to ascend to a predetermined giving level in three years' time. Beginning in year one, the individual is recognized at the highest level. <table style="margin-left: 40px;"> <tr> <td></td> <td style="text-align: center;">Year 1</td> <td style="text-align: center;">Year 2</td> <td style="text-align: center;">Year 3</td> </tr> <tr> <td><input type="checkbox"/> Cornerstone.....</td> <td style="text-align: center;">\$550</td> <td style="text-align: center;">\$750</td> <td style="text-align: center;">\$1,000</td> </tr> <tr> <td><input type="checkbox"/> Pillar.....</td> <td style="text-align: center;">\$1,000..</td> <td style="text-align: center;">\$1,750</td> <td style="text-align: center;">\$2,500</td> </tr> <tr> <td><input type="checkbox"/> Pioneer.....</td> <td style="text-align: center;">\$2,500..</td> <td style="text-align: center;">\$3,750</td> <td style="text-align: center;">\$5,000</td> </tr> <tr> <td><input type="checkbox"/> Tocqueville Society..</td> <td style="text-align: center;">\$5,000..</td> <td style="text-align: center;">\$7,500</td> <td style="text-align: center;">\$10,000</td> </tr> </table>		Year 1	Year 2	Year 3	<input type="checkbox"/> Cornerstone.....	\$550	\$750	\$1,000	<input type="checkbox"/> Pillar.....	\$1,000..	\$1,750	\$2,500	<input type="checkbox"/> Pioneer.....	\$2,500..	\$3,750	\$5,000	<input type="checkbox"/> Tocqueville Society..	\$5,000..	\$7,500	\$10,000	<input type="checkbox"/> Individuals who make a gift of \$500 – \$999.99 will receive a recognition pin and will be invited to the awards ceremony. \$ _____
	Year 1	Year 2	Year 3																		
<input type="checkbox"/> Cornerstone.....	\$550	\$750	\$1,000																		
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	3 School Bell Club																				
	<input type="checkbox"/> Individuals who make a gift of one day's pay will receive special recognition from the Superintendent. \$ _____																				
	4 I wish to make a gift of: \$ _____																				

Recognition options - please mark and complete information, if applicable.

LINC: I'm under 30 years-old and have contributed a gift of \$250 or more
 Men United: I'm a man giving \$1,000 or more
 Women United: I'm a woman giving \$1,000 or more
 Young Leaders: I'm 40 years-old or younger and making a gift of \$1,000 or more
 Tocqueville Society: I contribute a gift of \$10,000 or more
 United Way Leadership & Endowment Circle family gift: I am combining my gift with that of my spouse/partner for a donation of \$1,000 or more

NAME OF SPOUSE _____ EMPLOYER: _____

Method of payment

Payroll donation
 Deduct \$ _____ per pay period for a total of \$ _____ per year.
 I understand that payroll deductions will run continuously every year until I give written consent to M-DCPS to change my deduction.

One-time gifts only \$ _____
 Cash Check enclosed # _____
 I wish to pay by credit card. (Please call (305) 646-7061).

I subscribe my gift to the United Way Miami campaign and hereby authorize equal payroll deductions of this amount from each of my paychecks as indicated above. I understand that such deduction is revocable upon thirty (30) days written notice to the employer and United Way Miami, provided however, that such deduction shall be in force so long as United Way Miami is authorized to raise funds at M-DCPS. I hereby waive my right and claim to said monies so deducted and transmitted in accordance with this authorization and relieve the board and all of its officers of any liability thereof.

United Way Miami has not provided goods or services in return for your contribution that would limit the tax deductibility of your contribution. A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling 1-800-HELP-FLA toll-free within the state. Registration does not imply endorsement, approval, or recommendation by the state. 100% of contributions received by United Way Miami. Registration number: SC-00630.

Signature _____ Date _____

In signing this form I agree to make this gift and authorize my employer to deduct from my paycheck until I give written notification otherwise.

United Way Miami • The Ansin Building • 3250 Southwest Third Avenue • Miami, Florida 33129-2712 • (305) 646-7000 • unitedwaymiami.org