UNITED IS THE WAY TO A BETTER TOMORROW

UNITED WAY
Mower County

MY INFORMATION

FIRST NAME: LAST NAME: EMAIL:

HOME ADDRESS: CITY: STATE: ZIP:

MY DONATION

CASH / CHECK

☐ CASH ☐ CHECK # _____

AMOUNT: $ _____

My cash or check donation for the amount indicated above is enclosed with this form.

BILLING

Address required in 'My Information' above

I would like to give later. Bill me on or after February 1 for the total amount below at the specified frequency:

☐ ONE TIME ☐ QUARTERLY

AMOUNT: $ _____

$100 Minimum

CREDIT CARD

www.uwmower.org/creditcard

I have made a credit card donation online on the transaction date below for the amount specified:

AMOUNT: $ _____

TRANSACTION DATE: _____

IRA FYI

If you are 70 1/2 or older and have an IRA, consider making a Qualified Charitable Distribution (QCD). Learn more at uwmower.org/donate.

UWMC INFO

EIN: 41-0831896

Mailing Address:
PO Box 605
Austin, MN 55912

Contact:
Molly Lanke
mlanke@uwmower.org

DONOR ADVISED FUND

I have initiated the following donation through my donor advised fund:

AMOUNT: $ _____

NAME OF FINANCIAL INSTITUTION:

_____

STOCK

Email address required in 'My Information' above

I would like UWMC to contact me with stock donation procedures.. I plan on donating stock at an estimated value of:

AMOUNT: $ _____

OPTIONAL PREFERENCES

☐ I WOULD LIKE THIS GIFT TO REMAIN ANONYMOUS. PLEASE DO NOT LIST MY NAME IN GIVING MATERIALS.

☐ PLEASE RECOGNIZE THIS GIFT UNDER THE FOLLOWING NAME(S): _____

☐ OTHER PREFERENCES: _____

THANK YOU FOR SUPPORTING LOCAL NONPROFITS, PROGRAMS, AND PEOPLE