

United Way of Murray-Calloway County Donation Form



607 Poplar Street Murray KY 42071 Ph: 270.753.0317 www.mccunitedway.org

Step 1: My Information:

Mr./Mrs./Ms.	First Name	MI	Last Name	
Street Address		Mailing Address	City/State	Zip
Name of Business or Employer		Daytime Phone #	email address (for confirmation use only)	

Step 2: My Gift

PAYROLL DEDUCTION I want to contribute the following per pay period: **My Authorization Signature**

\$100 \$50 \$25 \$10 Other _____ x pay periods

Signature Date

Personal Check \$ _____ **Cash** \$ _____ (attach - checks payable to United Way)

Step 3: My Choice

PLEASE CHOOSE HOW YOU WANT TO INVEST IN MURRAY-CALLOWAY COUNTY

INFLUENCE THE CONDITION OF ALL. United Way Community Impact Fund. Positive Impact - Measurable Results

I WANT TO GIVE TO THE COMMUNITY IMPACT FUND, but direct my gift to one or more of these goals

Income: Helping Families Understand Their Budgets and Finances **Health:** Achieving preventative health care and healthy living **Education:** Combating youth's use of alcohol, tobacco and drugs

You may also give to a specific health or human service group: **Organization Name** _____