

YOU ARE MAKING A DIFFERENCE, RIGHT HERE IN BERKSHIRE COUNTY.

Please print clearly. Your information is kept confidential and will not be sold or shared. (Required Info)

Mr. Mrs. Ms. Dr. Name: _____ Employer: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email: Personal Work _____ Phone: Home Work Cell _____

I prefer that my gift remain anonymous. Donor Recognition Name(s): _____

LAST YEAR YOU GAVE OVER \$1.6M TO HELP LOCAL RESIDENTS:

PREPARE FOR KINDERGARTEN



INCREASE LITERACY RATES



GAIN PARENTING SKILLS



CONNECT WITH MENTORS



FIND NEW AND BETTER JOBS



MY INVESTMENT:

ONE-TIME DONATION

One-time annual donation of \$_____ to be paid by:

- Cash
- Check (to Berkshire United Way)
- Credit Card (Visa, American Express, or MasterCard)

Please enter your credit card information on our secure website, berkshireunitedway.org/donate or call us at 413.442.6948.

EASY PAYROLL DEDUCTION

(Begins Jan. 1)

I want to contribute the following amount each paycheck: X Number of pay periods per year:

- \$20 \$10 12 months
- \$5 \$2 26 bi-weekly
- \$1 other _____ 52 weeks
- other _____ other _____

\$_____ = Total Amount Yearly

DONATION INFORMATION

- I am a first-time donor
- I have included or am interested in including BUW in my will, trust or estate plan
- I would like to join the Greylock Society of Leadership (Donations \$1,000+)

THANK YOU!!!

I CHOOSE TO SUPPORT ALL PROGRAMS FOR MAXIMUM LOCAL IMPACT

Your donation will support education, health, and financial stability efforts for residents right here in our community.

Or I prefer to designate my gift specifically to help:

- prepare children for school
- teens plan for college/career
- working families succeed
- other (see back)

5 REASONS TO SHARE YOUR PERSONAL CONTACT INFORMATION:

1. WE CAN SAY THANK YOU FOR MAKING A DIFFERENCE.

2. WE CAN APPROPRIATELY RECOGNIZE YOUR GIFT.

3. YOU CAN RECEIVE PROGRAM UPDATES AND BE INVITED TO EVENTS.

4. YOU WILL HEAR ABOUT VOLUNTEER OPPORTUNITIES.

5. WE CAN STAY IN TOUCH IF YOU CHANGE JOBS OR RETIRE.

PLEASE SIGN YOUR NAME (Required Info) _____ DATE _____

FILL OUT THIS PLEDGE FORM FOR A CHANCE TO WIN A

GATEWAYS
inn



BERKSHIRE EXPERIENCE

Enjoy a two-day stay and dine experience at Gateways Inn in Lenox, visit cultural attractions, and explore local activities. *More details to be announced.*

AGENCY DESIGNATION INFORMATION

- Northern Berkshire United Way Williamstown Community Chest

You must complete this section if you are designating all or a portion of your gift to go to another 501(c)3 organization. *

\$ _____ 501(c)3 Organization Name: _____

Address: _____ Federal Tax ID#: _____

City: _____ State/Zip: _____ Phone: _____

*Minimum \$52. A processing fee of 9.2% will apply to agency designations. If a charity is not a 501(c)3 or the information you provided is incomplete, we will attempt to contact you. If we can't reach you, or your designation is less than \$52, we will apply your donation to the BUW general fund. Processing of designations is not an endorsement of any charity.

CONTACT US

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#HereForGood



Berkshire United Way