



**JOIN**

**THE FIGHT**



**\$5 PROVIDES OVER 2,000 MEALS TO FAMILIES IN OUR COMMUNITY STRUGGLING WITH HUNGER**



**\$10 PROVIDES A CHILD WITH A FORENSIC MEDICAL EXAM AFTER BEING THE VICTIM OF SEXUAL TRAUMA**



**\$20 SUPPORTS A SITE-BASED MENTORSHIP MATCH FOR AN ENTIRE SCHOOL YEAR**



**\$50 PROVIDES THREE CHILDREN IN FOSTER CARE WITH A VOLUNTEER ADVOCATE FOR ONE FULL YEAR**



**TELL US ABOUT YOURSELF**

Mr.  Mrs.  Ms.  Dr. Date of Birth \_\_\_\_\_

First & Last Name \_\_\_\_\_

Company \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

Please recognize my gift as \_\_\_\_\_

I prefer not to be listed in publications

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contact information is used to share results on how your investment is making a difference in our community. All information is kept confidential.

**DECIDE HOW MUCH & HOW TO GIVE**

**EASY CREDIT OR DEBIT CARD CONTRIBUTION**

\$50  \$20  \$10  \$5  \$ \_\_\_\_\_

Credit/Debit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

\$ \_\_\_\_\_ x 12 Months = \_\_\_\_\_  
Monthly Contribution Annual Contribution

**CASH, CHECK OR BILL ME**

I would like to pay by check (attached) \$ \_\_\_\_\_

I would like to make a cash investment \$ \_\_\_\_\_

Please bill me (\$1000 minimum ) \$ \_\_\_\_\_

Must provide full address and contact information above. Invoices will be mailed quarterly unless otherwise requested.

**FOCUS MY DONATION TO SUPPORT THE FIGHT FOR**

Community Impact

Way to Work

Financial Stability & Employment

Education & Supportive Relationships

Health & Basic Needs

Other/County: \_\_\_\_\_

Please see reverse for United Way funded community partners and designation policy.

**United Way of Central Kentucky**



# DESIGNATION POLICY



## Donor designations will be honored to:

- United Way of Central Kentucky Programs & Funded Partners - those programs vetted through our Community Investment Team Process (see list below)
- Counties served by United Way of Central Kentucky and other local United Ways
- One of our Community Impact Focus Areas - Education, Financial Stability, Health, Basic Needs

Exception: Designations totaling \$1000 per non-funded partner received from all donors will be honored. If designations do not meet this minimum threshold, they will be automatically invested into the Community Impact Fund which provides grant funding to programs within United Way of Central Kentucky's service area.

## FUNDED PARTNERS

### United Way of Central Kentucky Programs:

- MoneySense
- Born Learning Academy
- Central KY Serves Volunteer Center
- Volunteer Income Tax Assistance
- 2-1-1 Resource Hotline
- Way to Work
- Read, Tutor, Mentor

### United Way Funded Partners:

- Big Brothers Big Sisters
- Breckinridge County Schools
- Breckinridge-Grayson Programs
- CASA of the Heartland
- Cloverport Independent Schools
- Community Health Clinic
- Elizabethtown Independent Schools
- Feeding America, Kentucky's Heartland
- Grayson County Alliance
- Grayson County Ministerial Association
- Grayson County Schools
- Hardin County Schools
- Hardin County Skills U
- Helping Hand of Hope
- Home of the Innocents
- Larue County Schools
- Shepherd's Pie Food Pantry
- Mission Hope for Kids
- Silverleaf Sexual Trauma & Recovery Services
- SpringHaven Domestic Violence Program
- Tri County CASA

# LEADERSHIP GIVING



## Leadership donors join the fight by providing solutions to our community's most complex challenges.

Leadership donors are the champions of change who annually contribute \$1000 or more to United Way of Central Kentucky, accounting for 25% of our annual campaign. These individuals are recognized with the following benefits:

- Listing in the Annual Report
- Exclusive invitation to special events
- A reserved invitation to join the United Way Fellowship leadership class at no cost