

2024 ALOHA UNITED WAY DONATION FORM



200 N. Vineyard Boulevard, Suite 700 • Honolulu, Hawaii 96817-3952 Email: donorrelations@auw.org • AUW.org

CORPORATE

SHAPE OUR FUTURE We have the opportunity to change course as a community, but it requires dedication, cooperation, and planning. When you give to Aloha United Way, it's more than a donation. You are providing food, shelter, education, transportation, and hope. Your dollars are invested in the programs and services that our community needs now to build a more stable and resilient tomorrow. AUW is your bridge, connecting people and resources.

| COMPANY INFORMATION | | | | |
|---------------------------------------|-----------------------------|--------------------------------|---|--|
| | | | | |
| ompany Name | | | | |
| EO Name | Title | | | |
| | | | | |
| ddress | City | State | State Zip Code | |
| hone | | | | |
| ow would you like your company | | tion purposes? e to: | | |
| EMPLOYEE GIVING HISTORY | | | | |
| | 2023 History | 2024 AUW GOAL | 2024 COMPANY GOAL (Company completes this section) | |
| TOTAL | | | | |
| Employee Gift | | | | |
| Specials Event(s) | | | | |
| Number of Donors | | | | |
| Number of Leadership Givers | | | | |
| Leadership Dollars (\$1,000 or more) | | | | |
| CORPORATE PLEDGE | | | | |
| 2023 CORPORATE GIFT: \$ | OUR 20 | 024 CORPORATE GIFT WILL BE: \$ | | |
| Please select all that apply: | | | | |
| ☐ I have enclosed a check made payabl | e to Aloha United Way | | | |
| | | | | |
| Please bill me \$: | | | | |
| Quarterly Annually One tim | e Beginning on (MM/YYYY): [| | | |
| | | | | |
| SIGNATURE REQUIRED (Electronic | Signature Accepted) | Date: | | |
| Print Name | Title | | | |

| Aloha United Way has developed specific funds to tackle the greatest issues tagencies that provide the support services to make a greater collective impact | | |
|---|---|--|
| 2-1-1 (80106) \$ | ALICE (80114) \$ | |
| COMMUNITY CARE (80100) \$ | SAFETY NET (80105) \$ | |
| OPTIONAL INVESTMENT | | |
| Our goal is to make it as easy as possible for you to meet your philanthropic can allocate a gift below. Gifts less than \$20 per agency will be allocated to the | | |
| AGENCY DESIGNATION (\$20 minimum per agency and no processing fees charged.) | AGENCY DESIGNATION (\$20 minimum per agency and no processing fees charged.) | |
| Code: Amount: \$ | Code: Amount: \$ | |
| Code: Amount: \$ | Code: Amount: \$ | |
| SOCIETY OF YOUNG LEADERS (80116) \$ | WOMEN UNITED (80115) \$ | |
| Join other young professionals on a mission to serve and make a positive impact on community issues. Ages 21-39. | Serve with women leaders empowering women to move from poverty and crisis to economic success and security. | |
| Yes, I would like to join or renew | Yes, I would like to join or renew | |
| | | |
| THANK YOU | | |
| Thank you for your pledge. Your contribution makes a tangible different access, medicine, and childcare to local neighbors and families. | nce, providing essential resources such as food, shelter, education | |
| I wish to remain anonymous. | | |
| [I'd like to subscribe to the AUW monthly newsletter to stay (Rest assured, we do not spam our email subscribers.) Pre- | y informed about the impact of my donation on our community. eferred email: | |
| | | |
| | | |

MAKE THE GREATEST IMPACT BY DONATING TO ALOHA UNITED WAY

(No minimum required and no processing fees charged.)