

2024 ALOHA UNITED WAY PLEDGE FORM



200 N. Vineyard Boulevard, Suite 700 • Honolulu, Hawaii 96817-3952 (808) 543-2208 • Email: DonorRelations@auw.org • AUW.org

GENERAL

This form must be signed and returned to Aloha United Way no later than December 31, 2024

MY DONOR INFORMATION (Please Print Clea	arly)	
Ir. Mrs. Ms. First Name	M.I. Last Name	Work Personal
referred Email Address		
ome Address	City	State Zip Code
ompany Name		
ork Phone	Cell Phone	
Age:	rent, trade or sell donor contact informatio	United Way respects the privacy of its contributors and does not not. Your information is used only to properly credit your contributively and related program information. <i>Mahalo for your support!</i>
MAKE THE GREATEST IMPACT BY DON	NATING TO ALOHA UNITED WAY (No mi	nimum required and no processing fees charged.)
	to tackle the greatest issues facing our community. Aske a greater collective impact in the areas below.	We bring together and invest in non-profit partner
	ALICE	(80114) \$
2-1-1 (80106) \$		
2-1-1 (80106) \$ COMMUNITY CARE (80100) \$_		Y NET (80105) \$
COMMUNITY CARE (80100) \$_		
	SAFET	
COMMUNITY CARE (80100) \$_ MY PAYMENT METHOD PAYROLL DEDUCTION: Number of Pay Periods: DIRECT GIFT	SAFET	Total Payroll Deduction: Total Direct Gift:
COMMUNITY CARE (80100) \$_ MY PAYMENT METHOD PAYROLL DEDUCTION: Number of Pay Periods: DIRECT GIFT Cash Check (Payable to Aloha United) CREDIT CARD VISA MasterCard	Payroll deduction begins January 2025. Way) Check #: American Express Discover Exp. Date:	Total Payroll Deduction: Total Direct Gift: Total Credit Card:
COMMUNITY CARE (80100) \$_ MY PAYMENT METHOD PAYROLL DEDUCTION: Number of Pay Periods: DIRECT GIFT Cash Check (Payable to Aloha United) CREDIT CARD VISA MasterCard Card Number:	Payroll deduction begins January 2025. Way) Check #: American Express Discover Exp. Date:	Total Payroll Deduction: Total Direct Gift: Total Credit Card: S
COMMUNITY CARE (80100) \$	SAFET Payroll deduction begins January 2025. Way) Check #: American Express Discover Lime Beginning on (MM/YYYY): Lime July July July July July July July July	Total Payroll Deduction: \$ Total Direct Gift: \$ Total Credit Card: \$ Ending on (MM/YYYY): / Total Billing: \$ Total Automatic Transfer
COMMUNITY CARE (80100) \$	Payroll deduction begins January 2025. Way) Check #: American Express Discover Lime Beginning on (MM/YYYY): LIJ / LIJ	Total Payroll Deduction: \$ Total Direct Gift: \$ Total Credit Card: \$ Ending on (MM/YYYY):/ Total Billing: \$ Total Automatic Transfer

OPTIONAL INVESTMENT

Our goal is to make it as easy as possible for you to meet your philanthropic goals and feel great about your giving. If you have a favorite non-profit, you can allocate a gift below. Gifts less than \$20 per agency will be allocated to the community needs.

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 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
LEAVE A LASTING LEGACY	
Leave a lasting legacy for the community and causes you love by joining the as simple as naming us as a beneficiary in your will, trust, retirement plan, life	e insurance policy or other financial accounts.
(iii) I've already included Aloha United Way in my will or estate	plans. Please confirm my membership in the Ānuenue Legacy Society.
For more information, visit auw.org/planned-giving	
Annenue LEGACY SOCIETY Aloha United Way	
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	r informed about the impact of my donation on our community. eferred email: