

Donation Form



1 MY CONTACT INFORMATION *Indicates Required Field

First Name* _____ Last Name* _____

Home Address* _____ City/Province* _____ Postal Code* _____

Contact Phone (____) _____ - _____ Contact Email* _____

*Email required for electronic tax receipt

Department * _____ Contact me by Email Phone Please send my tax receipt by mail instead of electronically

2 MY UNITED WAY – MY INVESTMENT (Select your United Way Below)

The UNITED WAY COMMUNITY FUND is the most powerful way to invest in YOUR local community. United Ways work with community stakeholders to understand the most pressing local needs and then invest your dollars in charitable organizations providing high-impact programming and services to meet those needs. Through our vigorous application, evaluation and accountability process, you can be assured that your contribution is driving the very best solutions to priority issues in your local community.

Yes, I am retiring this year, please add me to the retiree mailing list

Fredericton & Central NB
Serving Queens, Sunbury, York, Carleton, Victoria, Madawaska and Restigouche Counties

\$ _____

Greater Moncton & Southeastern NB
Serving Albert, Kent, Northumberland, Westmorland, and Gloucester Counties

\$ _____

Saint John, Kings and Charlotte
Serving Saint John, Kings and Charlotte Counties

\$ _____

I want to support another registered Canadian charity and I understand this charity IS NOT evaluated* by United Way.
Specify Canadian Charity _____ Registered Charity Number** _____

\$ _____

NOTE: There are processing fees associated for all designations to cover the cost associated with your designation to other charities. For information on Canadian Charities, visit www.canada.ca/charities-giving

*Evaluation includes review of financial stability, governance and sustainable impact against root causes.
**In order for us to process your designation, you must provide us with a registered charity number.

MY TOTAL DONATION = \$ _____

3 MY DONATION METHOD

PAYROLL DEDUCTION

I authorize the deduction of \$ _____ x _____ number of pay periods = \$ _____

Between January – December

OTHER FORMS OF PAYMENT

Cash Cheque* _____ = \$ _____

To make a secure donation with a Credit Card or Visa Debit, please visit your local United Way's website listed at the bottom of this form, or for assistance call the appropriate number listed below.

*Make cheques payable to your chosen United Way as their full names are written at bottom of form.

Tax Receipts

Tax receipts are issued by February 28th, except for payroll donations which will be recorded on Box 46 of your T4. Donations under \$20 are not eligible for tax receipts.

MY TOTAL DONATION (Should be the same as section 2) = \$ _____

4 FOR YOUR PAYROLL OFFICE

Name* _____ Employee #* _____

Employer Name* _____ Department* _____

My United Way * Fredericton & Central NB Greater Moncton & Southeast NB Saint John, Kings, and Charlotte

I authorize the deduction of \$ _____ x _____ number of pay periods = \$ _____

Signature* _____ Date* _____ ECC Signature* _____

(For cash donations only)

THANK YOU

United Way of Central New Brunswick

1A-385 Wilsey Road | Fredericton, NB E3B 5N6 | (506) 459-7773 | office@unitedwaycentral.com
www.unitedwaycentral.com | Charitable #: 10816 0011 RR0001

United Way of Greater Moncton & Southeastern New Brunswick

22 Church Street, T210 | Moncton, NB E1C 0P7 | (506) 858-8600 | office@moncton.unitedway.ca
www.gmsenunitedway.ca | Charitable #: 11927 8455 RR0001

United Way of Saint John, Kings and Charlotte

28 Richmond Street | Saint John, NB E2L 3B2 | (506) 658-1212 | gina@unitedwaysaintjohn.com
www.unitedwaysaintjohn.com | Charitable #: 11927 8190 RR0001