

YOUR GIFT WILL TRIGGER TAX CREDITS THAT CAN SAVE YOU MONEY

	ANNUAL GIFT	TAX SAVINGS*	NET COST
FRIENDS	\$ 100	\$26	\$74
PARTNERS	\$ 365	\$128	\$237
	\$ 550	\$214	\$336
LEADERS OF THE WAY	\$ 730	\$298	\$432
	\$ 1,200	\$516	\$684
	\$ 2,400	\$1,072	\$1,328
	\$ 3,600	\$1,629	\$1,971

Your gift will result in a non-refundable tax credit. This table represents approximate savings.

*Approximate

Optional Complete this section **ONLY** if you have special instructions to designate your gift.

My gift to United Way Winnipeg for

Help where it's needed most

\$ **A**

AND/OR Additional support for more:

Mentors for kids

\$ **B**

Youth mental health supports

\$ **C**

Job skills and money management training

\$ **D**

Neighbourhood-based support

\$ **E**

My total **(A+B+C+D+E)** gift to United Way Winnipeg is: (this will be your United Way Winnipeg recognition level) \$

My gift(s) to other charities

As an additional convenience, United Way Winnipeg offers donor-directed giving. Please note there is a cost recovery fee of \$12 for each designation.

Please print the registered charity name(s) and registered charitable number(s) in full. **

I would like United Way Winnipeg to forward the specified amounts to the following:

1. Charity's name: _____

Registered charitable number: _____ \$ **F**

2. Charity's name: _____

Registered charitable number: _____ \$ **G**

3. Charity's name: _____

Registered charitable number: _____ \$ **H**

Please don't forward my name to designated charity/charities.

GRAND TOTAL **(A+B+C+D+E+F+G+H)** (this should equal the total amount of gifts shown on previous page) \$

** To ensure the charity's legal name and charitable number are correct, please check <http://www.cra-arc.gc.ca/chrts-gvng/lstngs/menu-eng.html>

580 Main Street | Winnipeg MB R3B 1C7 | P 204-477-5360 | F 204-453-6198 | E info@unitedwaywinnipeg.ca | W unitedwaywinnipeg.ca

Manitoba 

Every dollar you donate to United Way Winnipeg goes to making a difference in our community, thanks to a grant from the Province of Manitoba that supports fundraising and administration costs.

BUG

RD-EMP-EPP-05/2019



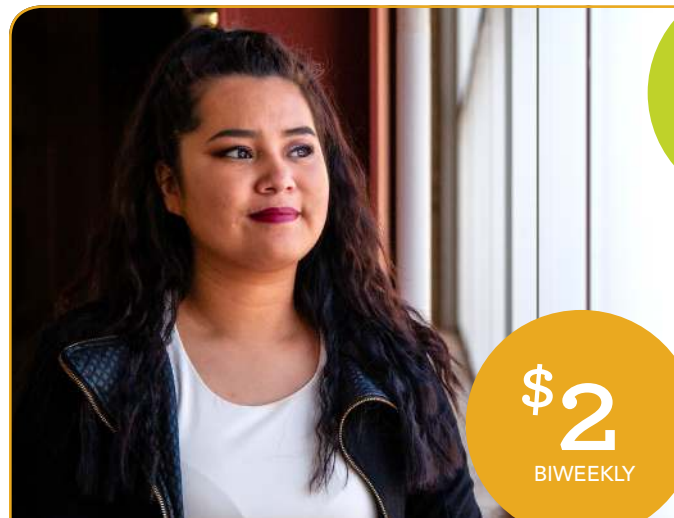
United Way
Winnipeg

PLEDGE
FORM INSIDE
*Make your
pledge!*

BECAUSE I ❤️ WPG
I WANT TO CHANGE LIVES!

TURN THE PAGE BECAUSE YOU ❤️ WINNIPEG

Because you love Winnipeg, change someone's life for the better!
Be an important part of a community-wide effort to help even more
kids and families who desperately need it.



\$2
BIWEEKLY

You can **connect one more kid with a mentor** once a week for a year.

Kids have a **75% better chance** of graduating and going on to post-secondary when they have a mentor.



\$5
BIWEEKLY

You can connect **two youth** each month with a mental health promotion worker, to help them develop **positive coping skills**.

80% of people who get support for mental health issues are able to **successfully return to regular activities**.



\$10
BIWEEKLY

Provide 95 newcomer or Indigenous youth with pre-employment training that sets the stage for long-term success in the job market.

75% of participants in a United Way Winnipeg-supported employment assistance program successfully secured employment.



\$14
BIWEEKLY

You can **give three families** two hours of counselling each, to overcome life's challenges and stay together as families.

88% of people who participate in parenting workshops at neighbourhood family centres in their community **say they're better parents as a result**.



1 Mr. Ms. Mrs. Dr. Other _____

Name _____

Home Address _____

City _____ Province _____

Postal Code _____ Phone (H) _____ (W) _____

Workplace/Organization _____

Email (Home) _____

Email (Work) _____

To better understand our donors, please respond to the following:

I was born in _____ (year)

I am/will be retiring from my workplace and want to stay connected with United Way Winnipeg

Retirement date: _____

MONTH _____ YEAR _____

2 **YES! I WANT TO CHANGE A LIFE!**

I'd like to make an annual gift of \$ _____

Registered Canadian Charitable Organization #119278513RR0001

3 THIS IS HOW I WANT TO MAKE MY DONATION

Payroll Deduction

Fill out section 5 below and forward it to your payroll office.

Other

- Cash (enclosed)
- Personal Cheque* *enclosed, made payable to United Way Winnipeg
- Post-dated Cheques*

Credit Card

- Visa MasterCard American Express

Card # _____ CSV: _____

Expiry Date _____ / _____

- In Full Monthly (1st, 15th)
- Quarterly (Jan, Apr, Jul, Oct)
- Beginning _____ DATE _____

4 Signature _____ Date _____

- For tax purposes we require a home address. Please ensure it is clearly captured above.
- Tax receipts for donations of \$20 or more will be emailed after December 31.
- To update your email address please contact Donor Services at donorservices@unitedwaywinnipeg.ca or 204-924-4275.
- For donations made through payroll deduction, your charitable giving will be included on your T4.

Thank You!

5 THIS SECTION REQUIRED FOR Payroll Deduction ONLY

Detach and forward to your payroll office

I authorize the deduction of \$ _____ per pay period for a **TOTAL GIFT** of \$ _____

Name _____ Organization _____

Signature _____ Date _____

Employee Number _____

United Way Winnipeg respects your privacy. Your information is collected to administer transactions and meet donor expectations. Please see our Privacy Policy on our website at UnitedWayWinnipeg.ca

DETACH ALONG FOLD

DETACH ALONG PERFORATION