

ECAP



Employees Combined Appeal Program 2011-2012

Step 1. I want my donation to help the following agencies:

I want my donation to help the following agencies listed in the ECAP Directory:

Please refer to the Agency List on the back for the Agency Codes, list as many agencies as you wish.

The complete directory can be found at

www.unitedwaytucson.org/cotecap

AGENCY CODE	AGENCY NAME	*AMT PER PAY PERIOD	*YEARLY AMT

*2012 will have 26 pay periods in the calendar year

I want my donation to help these agencies NOT listed in the ECAP Directory:

(MUST BE A 501(C) (3) AGENCY APPROVED BY IRS REGULATIONS)

AGENCY NAME	*AMT PER PAY PERIOD	*YEARLY AMT

Step 2. Make Your Gift

A. Easy Payroll Deduction

Payroll Deduction: I wish to donate the following amount from each paycheck.

*\$25 *\$19.25 \$15 \$10 \$5 \$2 \$ _____
(circle desired amount)

For donations of \$500 or more please print recognition name as you wish it to appear in the United Way Leadership Book or enter Anonymous (Please Print):

B. One Time Donation (Check one box only)

CASH/CHECK (payable to ECAP) \$ _____

PAYROLL DEDUCTION (onetime only) \$ _____

My total annual donation is \$ _____

*(annual donation of \$500 or more qualifies you as a Leadership Giver)

I do not wish to participate _____
(initial here)

ACKNOWLEDGEMENT OF GIFT INFORMATION:

I wish to remain anonymous in United Way printed materials

I wish to remain anonymous to the agency(ies) receiving my donation

Yes, I wish to be acknowledged by the agencies.

Home address below:

Step 3. Please sign and date below:

Signature _____

Date _____

Optional SSN _____

THANK YOU for your support of community needs through E.C.A.P.



United Way of Tucson and Southern Arizona

I acknowledge that no goods or services were received by me for this donation. All gifts are tax deductible to the extent provided by IRS regulations. A 15% processing fee is charged to all gifts. Please retain a copy for your tax records.