



2024 ALOHA UNITED WAY TOCQUEVILLE SOCIETY PLEDGE FORM

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



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

MY DONOR INFORMATION (Please Print Clearly)

Mr. Mrs. Ms. First Name _____ M.I. _____ Last Name _____ Work Personal

Preferred Email Address _____

Home Address _____ City _____ State _____ Zip Code _____

Company Name _____ Work Phone _____ Cell Phone _____

I prefer that my/our gift remain anonymous. List my/our name as:
 I would like to honor _____ with my gift.

Age: 18-39 40-45 46-55 56+
 Gender: Female Male Non-binary

OUR PRIVACY PLEDGE TO YOU: Aloha United Way respects the privacy of its contributors and does not rent, trade or sell donor contact information. Your information is used only to properly credit your contribution and to communicate about Aloha United Way and related program information. **Mahalo for your support!**

MAKE THE GREATEST IMPACT BY DONATING TO ALOHA UNITED WAY (No minimum required and no processing fees charged.)

Aloha United Way has developed specific funds to tackle the greatest issues facing our community. We bring together and invest in non-profit partner agencies that provide the support services to make a greater collective impact in the areas below.

2-1-1 (80106) \$ _____ ALICE (80114) \$ _____
 COMMUNITY CARE (80100) \$ _____ SAFETY NET (80105) \$ _____

MY PAYMENT METHOD

PAYROLL DEDUCTION: Number of Pay Periods: _____ Payroll deduction begins January 2025. Total Payroll Deduction: \$ _____

DIRECT GIFT Cash Check (Payable to Aloha United Way) Check #: _____ Total Direct Gift: \$ _____

CREDIT CARD VISA MasterCard American Express Discover Total Credit Card: \$ _____
 Card Number: _____ Exp. Date: _____
 Monthly Quarterly Annually One time Beginning on (MM/YYYY): ____/____/____ Ending on (MM/YYYY): ____/____/____

BILLING Monthly Annually One time Beginning on (MM/YYYY): ____/____/____ Total Billing: \$ _____

AUTOMATIC TRANSFER (Attach voided check) Total Automatic Transfer: \$ _____
 Transfer \$ _____ monthly from my checking account beginning on ____/____/15/2024

STOCK OR DONOR ADVISED FUNDS
Visit auw.org/give

TOTAL ANNUAL PLEDGE: \$
Your 2024 gift will be distributed in 2025. _____

_____ Date: _____
SIGNATURE REQUIRED (Electronic Signature Accepted)

It is our honor and privilege to welcome individuals/couples to membership in the Tocqueville Society when they have made a minimum personal commitment of \$10,000 annually.

Please contact us if you:

- Have an employer matching program.
- Wish to transfer funds from your IRA account, via Qualified Charitable Distribution, or from a foundation and have specific restrictions/instructions.
- Plan to transfer real estate or other property to fulfill your pledge.
- Wish to create an endowment to perpetually fund your annual contribution.

Please contact us at Tocqueville@auw.org if you have any questions.

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.)

Code: Amount: \$ _____

Code: Amount: \$ _____



SOCIETY OF YOUNG LEADERS (80116) \$ _____

Join other young professionals on a mission to serve and make a positive impact on community issues. Ages 21-39.

Yes, I would like to join or renew

AGENCY DESIGNATION (\$20 minimum per agency and no processing fees charged.)

Code: Amount: \$ _____

Code: Amount: \$ _____



WOMEN UNITED (80115) \$ _____

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

LEAVE A LASTING LEGACY

Leave a lasting legacy for the community and causes you love by joining the Ānuenu Legacy Society. Making a planned gift to Aloha United Way can be as simple as naming us as a beneficiary in your will, trust, retirement plan, life insurance policy or other financial accounts.



Please send me information on leaving a legacy gift to meet future community needs.

I've already included Aloha United Way in my will or estate plans. Please confirm my membership in the Ānuenu Legacy Society.

For more information, visit auw.org/planned-giving



Aloha United Way

THANK YOU

Thank you for your pledge. Your contribution makes a tangible difference, providing essential resources such as food, shelter, education access, medicine, and childcare to local neighbors and families.

I'd like to subscribe to the AUW monthly newsletter to stay informed about the impact of my donation on our community. (Rest assured, we do not spam our email subscribers.) Preferred Email: _____