

## **EdFinancial 2024 United Way Campaign**



Please com	plete this forr	n to contribute 1	o EdFinancial's	s 2024 United	d Way	campaign.

\* Required

## **Donor Information**

United Way of Greater Knoxville uses this information to acknowledge your gift, provide necessary tax receipts, and communicate how your gift is helping our community.

l. First	Name *		
2. Last	Name *		
3. Job <sup>-</sup>	litle little		

4.	Whi	ch EdFinancial location are you employed? *
	$\bigcirc$	Knoxville, TN
	$\bigcirc$	Dayton, TN
	$\bigcirc$	Montgomery, AL
	$\bigcirc$	Concord, NH
	$\bigcirc$	Harrisburg, PA
	$\bigcirc$	El Paso, TX
5.	Hon	ne Address (street address) *
6.	City	*
7	State	a *
,.	State	
8.	Zip (	Code *
9.	Pref	erred Phone Number *

10.	Preferred Phone Type
	Cell
	○ Work
11.	Preferred Email Address *
12.	Preferred Email Type
	Personal
	○ Work

## **Giving Information**

No goods or services were provided to you by United Way of Greater Knoxville in exchange for this contribution.

13. Aı	Annual Gift Amount *				
14. Pa	ayment Options (Please select one of the following) *				
	Easy Payroll Deduction				
	Paid online at: <a href="https://www.uwgk.org/?form=edfinancial2024">https://www.uwgk.org/?form=edfinancial2024</a>				
15. Fc	or Easy Payroll Deduction, I would like to contribute this amount per pay period:				

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