

Green Mountain United Way

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Caledonia/So. Essex:

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United
Way



*Mobilizing communities to create lasting changes
in local conditions that will improve lives.*

www.gmunitedway.org

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August 2015

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I write to you today to ask for your support for Green Mountain United Way (GMUW), a local nonprofit organization that works tirelessly for the people of Washington, Orange, Caledonia, Essex and Orleans Counties.

For the past forty years, GMUW has helped families take advantage of early learning opportunities for their children and assisted people of all ages to acquire financial literacy for their ongoing stability. They have provided local residents tips on how to become and stay healthy and have provided them the tools with which to meet their basic needs.

GMUW is beginning its annual campaign and I am proud to be a part of this very important effort for our local communities.

Please join me in making your contribution today by completing the form below, by donating online at www.gmunitedway.org/waystogive.shtml, or by scanning the QR code found at the left. Remember that your tax-deductible donation stays local to help our neighbors here at home.

If you have any questions, please feel free to call the Funding Resources Director at the GMUW Barre office at 802-622-8056.

With thanks,

Scott Milne
President, Milne Travel American Express
2015 – 2016 GMUW Campaign Chair



Donate

Green Mountain United Way

PLEDGE FORM

Name: _____	Direct Gift
Address: _____	<input type="checkbox"/> \$1000 <input type="checkbox"/> \$500 <input type="checkbox"/> \$250 <input type="checkbox"/> \$100
City: _____ State: _____ Zip: _____	<input type="checkbox"/> \$50 <input type="checkbox"/> \$25 <input type="checkbox"/> Other \$ _____
<input type="checkbox"/> Please mail me your newsletter <input type="checkbox"/> Please email newsletter	<input type="checkbox"/> Check # _____
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Areas I care about most:	<input type="checkbox"/> Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> MC exp: _____
<input type="checkbox"/> Education <input type="checkbox"/> Income <input type="checkbox"/> Health <input type="checkbox"/> Basic Needs	CC #: _____
<input type="checkbox"/> You may choose to designate your gift to another 501(c)3 nonprofit, (admin & uncollectable fees will be deducted from donations to designated organizations).	<input type="checkbox"/> Please bill me in the months of: _____
_____	<input type="checkbox"/> I wish to include GMUW in my will/estate plan.
<input type="checkbox"/> I wish my gift to be anonymous. <input type="checkbox"/> I prefer not to be thanked.	
X _____ Date: _____	
Please Sign	Thank you for supporting Green Mountain United Way!