

**YOUR GIFT helps ALL YEAR long,
supporting programs including services
for children, elderly, families,
physically challenged, unfortunate
and disadvantaged.**

**WE STAND UNITED
BECAUSE THIS IS
OUR COMMUNITY
our neighbors, our families, and
OUR FUTURE.
LIVE UNITED.** 

PLEASE OMIT the following programs from receiving any of MY contribution:

(Place a check next to the 2027 program(s) you wish to omit)

- | | |
|--|---|
| ☐ ACCESS (Domestic Violence, Sexual Abuse) | ☐ House of Compassion (Client Services & Meals) |
| ☐ Al Exito (Youth College & Career Success) | ☐ Iowa Legal Aid (Legal Assistance for Low-income) |
| ☐ ARC of Marshall County (Weekly/Summer Activities) | ☐ Iowa River Hospice (Day of Care) |
| ☐ American Red Cross of Central Iowa (Disaster Pgm) | ☐ LeGrand Community Center (Youth Summer LEAP Pgm) |
| ☐ Big Brothers/Big Sisters, Heart of Iowa (Mentoring) | ☐ Marine Cadets of Iowa (Youth Development) |
| ☐ Scouting America (Youth Development) | ☐ Marshalltown Youth Foundation (Youth Fee Assistance) |
| ☐ Center Associates (Mental Health) | ☐ MICA (Childcare Nutritional Food Program) |
| ☐ Urgent Care | ☐ MIW, Inc (Supported Employment for Mentally/Physically Challenged) |
| ☐ Caring Center (Clothing, Bedding, Housewares) | ☐ Northeast Iowa Agency on Aging (NEI3A) (Senior Support) |
| ☐ Central Iowa RSVP (Recruiting Community Volunteers Age 55+) | ☐ Salvation Army (Emergency Assistance, Basic Needs) |
| ☐ CIRSI (Support Mentally/Physically Challenged) | ☐ Emergency Assistance |
| ☐ Child, Adolescent, & Parent Support | ☐ Sal's Cupboard |
| ☐ School Based Health & Safety | ☐ Senior Citizens Center (Senior Activities) |
| ☐ Crisis Intervention | ☐ Triumph Recovery Center (Peer Support/Mental Health) |
| ☐ Building Healthy Families | ☐ YSS, Marshall County |
| ☐ Girl Scouts (Youth Development) | ☐ 24/7 Crisis Support Line |
| | ☐ MPACT |
| | ☐ Transitional Living Program (TLP) |

Please forward my gift to this United Way / Community Chest: _____

Name:
Addr:

Marshalltown Area United Way – 2026/2027 Campaign

709 S. Center St., #135 • Marshalltown, IA 50158 • (641) 752-4688

☐ Check if giving at \$250+ to be recognized as Leadership & fill out email below.

☐ Check if you prefer to remain anonymous.

☐ Check if your gift will be combined with a spouse.

Spouse Name & Workplace: _____

Select Your Payroll Deduction Giving Program

I authorize my employer to deduct my generous gift as follows:

☐ \$5 Per Week of the Year ☐ Bill me @ home (QTRLY)

☐ \$10 Per Week of the Year ☐ Other _____

☐ \$ _____ per paycheck # checks _____

email: _____

Billing Address

City

State

Zip

Signature (Please sign if balance due)

IF payroll deduct, turn into employer (Employer retains pledge card)



Total Gift Pledged:

_____ \$
(Annual Pledge)

_____ \$
Amount Paid Now

_____ \$
(Balance Due)

Email: office@unitedwaymarshalltown.org

Website: UnitedWayMarshalltown.org



Donate here on our website!



venmo

Marshalltown Area United Way has provided no goods or services to you in consideration, in whole or in part, for your gift described above. The Marshalltown Area United Way is an Iowa not-for-profit corporation and is exempt from Federal Income Tax as an organization described in Section 501(c)(3) of the code.

THANK YOU!!!