



Contractor & Retiree Pledge Form

NAME _____

ADDRESS: _____

City State Zip Code

Phone No.: _____

Select One:

<input type="checkbox"/> One-time contribution of \$ _____ Make check payable to 'United Way of Central New Mexico'	
<input type="checkbox"/> Please bill me for \$ _____ per quarter for a total annual gift of \$ _____	(Your statements will be sent Feb, May, Aug, Nov)
<input type="checkbox"/> Please bill me one time for \$ _____ (Your statement will be sent in February 2013)	
<input type="checkbox"/> Please charge my credit card one time for \$ _____ (Dec. 2012) or one time for \$ _____ (Feb. 2013) or Monthly beginning January 2013 for \$ _____ per month for a total of \$ _____ for the year or Quarterly beginning February 2013 for \$ _____ per quarter (Feb., May, Aug., Nov. 2013) for a total of \$ _____/yr. Card # _____ Exp. Date ____/____ <div style="text-align: right; font-size: small;">Mo. Yr.</div>	

You may designate your contribution to go to any non-profit tax-exempt organization in the nation by filling out the Donor Option box below. Your designated agencies must be qualified 501(c)3 health and human service organizations. **United Way of Central New Mexico has received corporate cornerstone funds to cover all administrative costs, therefore, 100% of your contribution will go directly to the agency you designate.** Undesignated gifts will support the United Way of the Bay Area Community Fund; to learn more about the United Way of the Bay Area, please see www.uwba.org. **Thank You for Your Support!**

Signature _____ Date _____

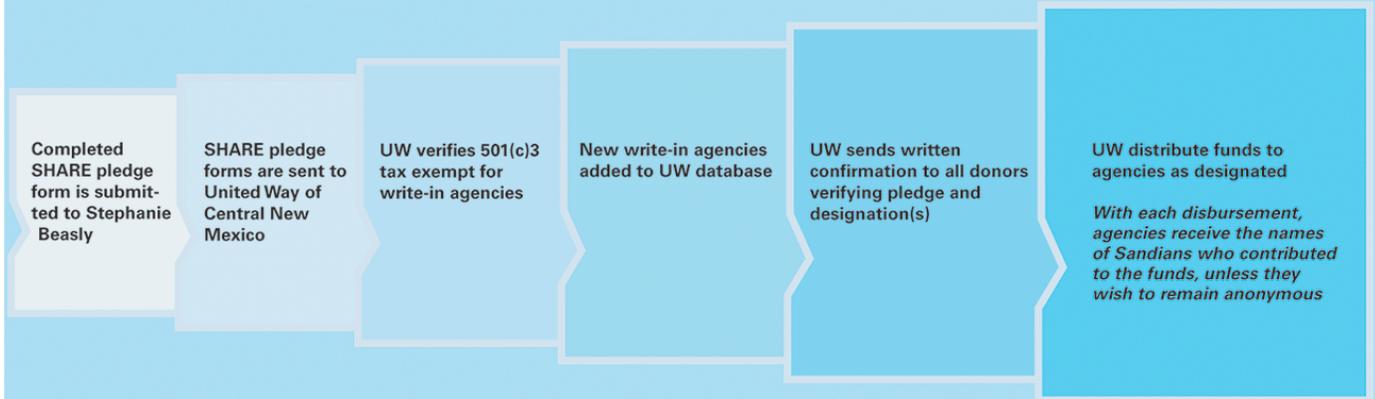
Donor Option: Complete ONLY if you want to designate a specific agency other than United Way of the Bay Area.

_____ Agency Name	\$	_____ Amount
_____ Agency Address		
<input type="checkbox"/> Check here if you do not want an acknowledgement from the agency (i.e. I wish to remain anonymous)		

_____ Agency Name	\$	_____ Amount
_____ Agency Address		
<input type="checkbox"/> Check here if you do not want an acknowledgement from the agency (i.e. I wish to remain anonymous)		

Please return this form to: Stephanie Beasly, MS 9114
 Questions? Please contact Stephanie Beasly at (925) 294-4992 or sbeasly@sandia.gov

United Way of Central New Mexico's (UWCNM) Payout Process for Sandia National Laboratories' Contractor and Retiree Designations



UWCNM receives funds from Lockheed Martin to administer the SHARE and ECP programs so that 100% of donated funds go to your agencies of choice. Any funds not designated for a specific agency will benefit the California Community Fund, the United Way of the Bay Area.

Please direct any questions regarding your agency's receipt of funds to Peggy Baca, Donor Designation Specialist, UWCNM, at 505-247-3671 ext. 568.