



Part 1: Donor Information

Name: _____ Employee ID# (no SSN): _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Part 2: Please Select Participation Level and Method of Payment

<input type="radio"/>	Direct Payment by Check (Minimum \$25) <i>Make check payable to "Pfizer United Way Campaign" and return with form in envelope provided.</i>	\$ _____ . 00
<input type="radio"/>	Stock: (stock donations can be made directly to your favorite charity or to your local United Way) <i>Please see insert for stock transfer instructions.</i>	\$ _____ . 00
<input type="radio"/>	I do not wish to participate.	

Part 3: Investing in Your Community

- I want to give to the United Way Community Fund (serving people in my local community where it is most needed.) **OR-**
- I want to designate my pledge to a specific United Way, United Way member agency, or other non-profit charity. Minimum of \$25.00 per selection. Not providing complete information may cause delays in processing your pledge.

Organization Name or Impact Area: _____ City / State: _____	Employer ID # (Optional): _____ Telephone: _____	% _____
Organization Name or Impact Area: _____ City / State: _____	Employer ID # (Optional): _____ Telephone: _____	% _____
Organization Name or Impact Area: _____ City / State: _____	Employer ID # (Optional): _____ Telephone: _____	% _____
Total: Allocations must equal 100%		100%

Part 4: Donor Recognition and E-updates (please complete both sections)

Section A. Please select one (1) of the donor recognition levels listed below. *If you do not make a selection, your name will not be released.*

- Release my name and home address to the recipient organization(s)
 - For acknowledgement (i.e. tax letter)
 - For print publication purposes
- Release my name only
- I wish to remain anonymous

Section B. United Way may use my e-mail address to send me E-updates on how my gift is helping.

- Yes Email Address: _____
- No

Part 5: Donor Signature (required)

Your donation is tax-deductible and is made without receiving any goods or services in return. The campaign will request a receipt from the organizations(s) on your behalf if you've elected a donor recognition level that permits the release of your name and address.

Signature _____ Date _____



Pfizer United Way Retiree Campaign

Return Completed Form to: Pfizer-United Way Campaign
P.O. Box 2072 Princeton, NJ 08543-2072



Questions: Call 1-866-746-8015 or email Pfizer@easymatch.com

Stock Transfer Information

Local United Way	Brokers	ACCT#	DTC#	FED TAX I.D.	UW CONTACT	PHONE	EMAIL
UW Greater St. Louis	Edward Jones	100-09948-1-2	0057	43-0714167	Wendi Lewis	(314) 539-4049	lewisw@stl.unitedway.org
UW SE Connecticut	UBS Financial Services	CO-02782	221	06-0771393	Julie Wachtman	(860) 464-3316	julie.watchman@uwsect.org
UW of San Diego	A.G. Edwards	6242-5386	0201	95-2213995	Randi Atkinson	(858)636-4143	ratinson@uwsd.org
UW of Kalamazoo	Robert W. Baird	3839 -9436	0547	38-1359193	Lisa Stover	(269)343-2524	lstover@qkuw.org
United Way of Lee County	Davenport & Co	1762-7853	0715	23-2384840	Jan Hayes	919-776-5823	janhayes@leecountyunitedway.org
United Way Mid South	Morgan Keegan	2986131	0780	56-1010742	Dynnice Perry	(901)433-4374	dyvnice.perry@uwmidssouth.org
UW of Northern New jersey	Edward Jones	313-14025-1-7	0057	22-1487247	Theresa Lepore	(973) 993-1160 ext105	Theresa.lepore@uwmorris.org
UW of Metro Atlanta	Wachovia Securities	8996-3234	141	58-0566194	Kevin Smith	(404) 527-7341	ksmith@unitedwayatlanta.org
UW of Southeastern Pennsylvania	Vanguard Brokerage Services	60253979	0062	23-1556045	Stock Donation Line	215-665-2564	

* Donations can also be directed to your designated charity.

United Way Matching Policy

The Pfizer Foundation will match donations made by Pfizer Inc colleagues to the United Way campaign dollar-for-dollar, up to a maximum of \$15,000 per contributor.

- Retiree donations will be matched at 50% up to a maximum of \$5,000.
- If you choose to designate your donation to a specific United Way or a United Way Partner (nonprofit organizations that partners with United Way to meet targeted goals) that helps, the Foundation's matching contribution will follow your designated contribution.
- However, if you choose to designate your donation to an organization that is not affiliated with United Way, only your gift will go to the charity; the Foundation match will go to the local United Way organization.

RESTRICTIONS & NON ELIGIBLE GIFTS

The Pfizer Foundation will not match or distribute funds to:

1. Organizations that do not have a 501 (c)(3) tax-exempt status
2. Private Foundations
3. Gifts made to Donor Advised Funds
4. Organizations that do not accept funds from Pfizer or the Pfizer Foundation
For example, Doctors Without Borders and Breast Cancer Fund
5. Religious organizations (e.g. churches, temples, synagogues, mosques)
Gifts may be eligible for a match if the programs operated by faith-based social service organizations meet certain criteria:
 - o *The organization has a 501 (c)(3) determination letter from the IRS;*
 - o *If the gift is designated to a particular program that is available and open to all individuals in the community;*
 - o *The program is for non-religious purposes (such as a food pantry or domestic abuse shelter) and:*
 - o *The organization does not use the program to promote any religion.*