

**2021 United Way Campaign Donation Instructions – [giveuw.org/chcs](https://giveuw.org/chcs)**

- 1. **User ID:** your chcsbc.org email  
**Temporary Password: CHCS2021**

User ID:

Password:

**LOGIN**

- 2. Select whether you want to deduct the donation from your paycheck or whether you would like to use a debit or credit card. Both have an option for recurring or one-time payments. **Most importantly, with both options, if you would like to designate your contribution to The CHCS Foundation, employees MUST click the ‘Yes’ beside the prompt to designate funds.** Click ‘NEXT’ once complete.

Please select your gift amount per pay period or enter an amount below:

**Deduction Per Pay Period:**

**Number Of Deductions To Make:**

**Total Annual Pledge:**

**Do you wish to designate your gift?**  Yes

Giving an undesignated gift to United Way of San Antonio and Bexar County is the best way to make the biggest impact in our community. However, if you wish to designate your gift, select the check box above for the list of goal areas, initiatives, United Way agencies and geographic areas that you may designate to by entering the designation code

**NEXT**

- 3. On the ‘Designations’ Page, scroll down until you see the search bar and type in ‘**Center for Health Care Services Foundation**’ (make sure not to make a typo)

- You will see our organization listed. Click the **'+' icon** to designate. Type in **your total amount** to CHCS in the field beside it.

Total Pledge	\$130.00
Total Designated	\$130.00
Total Undesignated	\$0.00

## IMPACT AND COMMUNITY PARTNERS

Click on United Way below to see the list of Impact and Community Partners

<a href="#">United Way of San Antonio and Bexar County</a>	\$0.00
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## IMPACT AND COMMUNITY PARTNERS SEARCH

Type any part of the Impact and Community Partners name or the Impact and Community Partners code and click search. Once your search results appear click on the **"+"** next to the Impact and Community Partners. Enter an amount and click on the Add button.

Name	Book #	Designation Amount
Center for Health Care Services Foundation	940	<input type="text" value="\$130.00"/> <input type="button" value="+"/> <input type="button" value="x"/>

- Click **'Next'** to redirect to the **'Preferences'** page

**NEXT**

- Once on the **'Preferences'** page, be careful to use your **first, middle initial, and last name** when filling out the **'Leadership Recognition Name'** section

**Leadership Recognition Name:**

First M. Last

- In the email box, use your **chcsbc.org email**

**Email Address**

employee@chcsbc.org

8. Be sure to click the checkboxes that email yourself, and CHCS a copy of the donation.

Send me an email confirmation of this pledge.  
(Please provide a personal, non-work email address above.)

Yes! Please forward my donor information to the agency(ies) I have designated.  
(Please provide a personal, non-work email address above.)

9. Continue with the rest of your information and move onto the **'Verification'** Page

Birthday Month (1 to 12)

0

Birthday (1 to 31)

0

Home Zip Code

Age Group

Cell Phone

Can Receive Text

Yes  No

10. On **'Verification'** page, double check that your information is correct, Click **'confirm.'**

Designated to	Designation #	Amount
Center for Health Care Services Fndtn	940	\$130.00
Total Designated		\$130.00
Total Undesignated		\$0.00

Once finished, please visit [chcsbc.org/get-involved/united-way](https://chcsbc.org/get-involved/united-way) to complete the final step to claim your exclusive prizes!