

# Corporate Donation

United Way



50 YEARS

Together, we  
can create  
positive change.

**YOU**NITED

[unitedwayhelps.org](http://unitedwayhelps.org)

COMPANY AND CONTACT PERSON

ADDRESS

CITY

STATE

ZIP

SIGNATURE

DATE

TITLE

WORK EMAIL

Total Gift \$ \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Balance \$ \_\_\_\_\_

Please Bill Us:  Annually

Semi-annually

Quarterly

Monthly

Other \$ \_\_\_\_\_

Billing Start Date: \_\_\_\_\_

Check # \_\_\_\_\_ Date \_\_\_\_\_

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