Corporate Pledge Form

STEP 1  COMPANY INFORMATION

Company Name ________________________  
Mailing Address ________________________  
City ________________________ State ________ Zip ________  
Form Completed By ________________________  Email ________________________  
Phone ________  Work ________  Pledge Authorized By ________________________  
List our name as ________________________  

STEP 2  OUR GIFT TO HELP OTHERS

A  Direct Gift

☐ DIRECT GIFT: $ ________________________  
☐ Check enclosed (Payable to United Way SWI)  
☐ Credit card (Text BeThe1 to 91-999 or visit unitedwayswi.org/give)

B  Bill Me

☐ BILL MY GIFT: $ ________________________  
Beginning in ________________________ , 2023  
☐ Invoice annually  
☐ Invoice quarterly

STEP 3  SIGNATURE

SIGN HERE: ________________________ Date: ____________  

No goods or services were provided in exchange for this gift. United Way respects your privacy and will never sell or trade donor information.

Thank you for your generosity!

OFFICE USE ONLY

Pledge Entered By: ________________________ Date: ____________  
Invoice Sent By: ________________________ Date: ____________