

## **CORPORATE PLEDGE FORM**

STEP 1 COMPANY INFORMAT	ION			
Company Name				
Mailing Address				
City	State	Zi	p Code _	
Form Completed By	Em	ail		
Phone Pledge	Authorized By			
List our name as			W	e want to be anonymous
Direct GIFT: \$  Check Enclosed (Payable to UWSWI)  Credit Card (unitedwayswi.org/give)	Bill Me  BILL MY GIFT  Beginning in  Invoice annually  Invoice quarterly	1		Scan the QR code for digital payment options.
STEP 3 SIGNATURE				
SIGN HERE:			Date:	

## Thank you for your generosity!

No goods or services were provided in exchange for this gift. United Way respects your privacy and will never sell or trade donor information. Your gift opts you into United Way of Southwestern Indiana updates regarding your gift's impact and other information.

Each communication includes an opt-out option.