



CREDIT CARDS ONLY *Paid In Full*

Please include the yellow copy of the pledge form(s).

COMPANY NAME

NUMBER OF CONTRIBUTORS

\$.

TOTAL DOLLAR AMOUNT

Dated Material – Please submit to United Way.

DO NOT MAIL – Please enclose this envelope in the CAUW Paid In Full Report Envelope.



Capital Area United Way

Thank You!

United Way Use Only:

Envelope # _____

Account # _____