

CAPITAL AREA UNITED WAY CORPORATE PLEDGE CARD



Capital Area United Way

INFORMATION

COMPANY NAME

BILLING CONTACT

ADDRESS

CITY, STATE, ZIP

PHONE

EMAIL ADDRESS

SIGNATURE

DATE

CORPORATE GIFT

TOTAL GIFT: \$ _____

CHECK ENCLOSED

Please make check payable to Capital Area United Way

BILLING OPTIONS*

BILL MONTHLY BEGINNING IN JANUARY

BILL QUARTERLY BEGINNING ON _____

BILL ON _____

**\$250 minimum for billing options*

For internal use:

ACCOUNT #: _____

STAFF NAME: _____

ENVELOPE #: _____

DATE: _____

CAPITAL AREA UNITED WAY FIGHTS FOR THE HEALTH, EDUCATION,
AND FINANCIAL STABILITY OF EVERY PERSON IN EVERY COMMUNITY



CONTACT: AMEY SHORTESS CROUSILLAC AT AMEYC@CAUW.ORG OR 225-382-3511

**700 LAUREL STREET
BATON ROUGE, LA 70802
(225) 383-2643 • CAUW.ORG**



THANK YOU!
Your gift enables United Way to fight for the health,
education, income stability