

# GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED™



## YES! We want to INVEST in our COMMUNITY

### Corporate Contribution Total \$ \_\_\_\_\_

#### Payment Method

Check Enclosed (*Payable to United Way of the Eastern Panhandle*)

Credit Card

Visa     MasterCard     American Express

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Authorization Signature \_\_\_\_\_ Date \_\_\_\_\_

Direct Billing

*Please bill me*     One time, to be billed \_\_\_\_\_ / \_\_\_\_\_

Quarterly

Semiannually

Please have someone contact us about conducting an employee campaign

#### COMPANY CONTACT FOR BILLING QUESTIONS

Company \_\_\_\_\_

Name \_\_\_\_\_

E-Mail \_\_\_\_\_

Phone \_\_\_\_\_

#### BILLING ADDRESS

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please Mail or Fax to:

United Way of the Eastern Panhandle

218 W. King Street • Martinsburg, WV 25401 • phone 304.263.0603 • fax 304.263.0614