

ORGANIZATION FINANCIAL CONTACT



United Way
of Greater Greensboro

Organization Name: _____ Campaign Year: 2019
Account Number: _____ Number of Employees: _____

Please help us maintain accurate records by providing the following information:

SECTION 1: Corporate or foundation giving contact

Name: _____

Mailing Address: _____

City / State / Zip: _____

Contact Preference: Mail E-mail

E-mail Address: _____ Phone: _____

How often would like to receive Corporate campaign reminders:

Monthly Quarterly Annually

Not at All (payments will automatically be sent)

SECTION 2: Employee payroll giving contact (if different from above)

Name: _____

Mailing Address: _____

City / State / Zip: _____

Contact Preference: Mail E-mail

E-mail Address: _____ Phone: _____

How often would like to receive Corporate campaign reminders:

Monthly Quarterly Annually

Not at All (payments will automatically be sent)

When would you like to receive your first campaign reminder: ____ / ____ / ____

(Default date is 1/1 of the new year after campaign is complete)

How Often will Employee Payroll payments be made:

Monthly Quarterly Annually

Paid in full at campaign close

**If you have any questions, please contact
Samantha Lyons-Kittrell in the Finance Department at
336-378-6608 or e-mail UWGSO.Finance@unitedwaygso.org.**