

Account Number: _____
Account Name: _____

Campaign Year: 2017
Number of Employees: _____

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

Name of CEO / President / Top Local Executive: _____

Mailing Address: _____

Both corporate and payroll will be billed at a minimum of twice a year

SECTION 1: Corporate Billing

Attn: Address: _____

City / State / Zip: _____

Billing Preference: Mail _____ E-mail _____
E-mail Address: _____

Phone for Contact: _____

SECTION 2: Payroll Billing

Attn: Address: _____

City / State / Zip: _____

Billing Preference: Mail _____ E-mail _____
E-mail Address: _____

Phone for Contact: _____

SECTION 3: Third Party Payment (if you have a third party—i.e. Cybersource, Frontstream, another United Way, etc.—that will send out payments to United Way for payroll and/or corporate billing please provide information below)

Name of Processor: _____

Address: _____

City / State / Zip: _____

Contact Name: _____

Contact E-mail: _____

Contact Phone: _____

SECTION 4: Employees Designate Dollars

Does your company pay these designation dollars directly to the agency or will you send the money to United Way? _____

SECTION 5: Employee Payroll Deduction Information

Employee deductions will begin on (Date): _____

Payroll deductions will be disbursed: Bi-Weekly _____ Bi-Monthly _____
Monthly _____ Quarterly _____

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.