



CORPORATE PLEDGE FORM

Company Name _____ Account Number _____

Address _____

Corporate Contributions Contact

Name _____ Contact Preference: ☐ Email ☐ Phone ☐ Mail

Email _____ Phone _____

Billing Address (if different than above) _____

2025 CORPORATE PLEDGE AMOUNT: \$ _____

Pledges for 2025 are payable by December 31, 2026

Our company matches employee gifts (Check one) ☐ 100% ☐ 50% ☐ Other: _____

Corporate Payment Reminders

☐ None. Payment will automatically be sent

☐ I would like to receive a pledge reminder each year as to my commitment to this pledge.

Payment Reminder Frequency (check one, indicate amount)

☐ Monthly \$ _____

☐ Semi-annually \$ _____

☐ Quarterly \$ _____

☐ Annually \$ _____

Reminder start date ____ / ____ / ____

Expect Gift from: ☐ Company ☐ Foundation ☐ Donor Advised Fund

Name of Foundation/Donor Advised Fund _____

AUTHORIZED SIGNATURE _____ **DATE** _____

EIN #56-0668555 | United Way Greater Greensboro | 1500 Yanceyville St Greensboro, NC 27405

No goods or services were provided in exchange for this contribution. Please keep a copy this form for your tax records. Consult your tax advisor for more information. *"Financial information about this organization and a copy of its license are available from the State Solicitation Licensing Branch at 919-814-5400 or 888-830-4989 for NC Residents. The license is not an endorsement by the State."*