

United Way of Gaston County, Inc.

Corporate Pledge Card

Company Name: _____

Chief Executive Officer: _____

Address: _____

City, State Zip: _____

Total Pledge \$ _____

Paid Now \$ _____

Balance Due \$ _____

BILL ME starting January 1:

Once on (date) _____ 2014

Quarterly beginning in January April July October

Monthly beginning in (list month) _____

Authorized Signature _____ Date _____

Please make checks payable to: United Way of Gaston County, Inc.

Mail to: PO Box 2597 - Gastonia, North Carolina 28053



United Way of Gaston County