CORPORATE CAMPAIGN GIFT CARD

UNITED WAY
Greater Waterbury

Total Gift $_____ Paid Now $_____ Balance Due $_____

Company Name: _____ Date: _____

Address: _____ Contact Name: _____

Email: _____ Phone: _____

Method of Payment

___Check Enclosed ___Credit Card **Please bill us:** ___One Time ___Quarterly

Credit Card No. /_/ Exp. /_/_/_/_/

CVV# /_/_/_/_/ Billing Zip /_/_/_/_/_/

Thank you *for investing locally through the United Way of Greater Waterbury.*

No goods or services were provided in exchange for your contribution.

(203) 757-9855
www.unitedwaygw.org