

Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_



**UNITED WAY OF BEAUMONT  
 & NORTH JEFFERSON COUNTY**  
 700 NORTH STREET, STE H

409.835.4575 FAX 835-0376

# REPORT ENVELOPE

This report is **PARTIAL** \_\_\_\_\_ or **FINAL** \_\_\_\_\_

	GIVING OPTION	INSTRUCTIONS	# OF GIVERS	TOTAL PLEDGES	CASH AND CHECKS ENCLOSED
1	Payroll Deduction	Forward payroll copy of pledge card to Payroll and enclose United Way copies of pledge card.			
2	Cash/Checks	Enclose cash, checks & pledge cards			
3	Employee Gift Total	Sum of Line 1 + 2			
4	Corporate Gift	(Enclose signed pledge card.)			

**COMPANY BILLING INSTRUCTIONS TO UNITED WAY:**

Send statements for PAYROLL DEDUCTIONS to:

Send statements for Corporate Gift to:

Please bill ( ) Monthly ( ) Quarterly  
 Beginning date: \_\_\_\_\_

Please bill ( ) Monthly ( ) Quarterly  
 Beginning date: \_\_\_\_\_

CURRENT NUMBER OF EMPLOYEES: \_\_\_\_\_

\_\_\_\_\_  
 (Print name of preparer.)

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 Date