

# CORPORATE CONTRIBUTION

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST/ZIP \_\_\_\_\_

President/Owner \_\_\_\_\_

Phone \_\_\_\_\_

# of Employees: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

## CORPORATE CONTRIBUTION:

Total Corporate Gift \$ \_\_\_\_\_

Amount Paid Now \$ \_\_\_\_\_

Balance \$ \_\_\_\_\_

To be billed:

Once on \_\_\_\_\_

Quarterly starting \_\_\_\_\_

Other \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_

Please make checks payable to  
United Way of Greater McHenry County

Visit our website at [www.uwmchenry.org](http://www.uwmchenry.org) for additional  
information and updates throughout the year.

**United Way  
of Greater McHenry County**

**United  
Way**



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**EVERY DOLLAR COUNTS  
THANK YOU!**