

Company: _____

Address: _____

CEO: _____

Acct #: _____

2011 COMPANY PLEDGE



United Way of York County

800 East King St

P.O. Box 1663

York, PA 17405

(717) 843-0957

Fax (717) 843-4082

www.unitedway-york.org

21 Baltimore Street

P.O. Box 1417

Hanover, PA 17331

(717) 632-8047

(Authorized Signature)

TOTAL # OF EMPLOYEES: _____

DATE: _____

	Total Pledge	Amount Paid	Balance Due
PLEASE BILL BALANCE DUE:			
ONCE ON: (Date) _____			
QUARTERLY: _____			
OTHER: _____ (Specify)			
COMPANY WILL REMIT BALANCE DUE:			
ONCE ON: (Date) _____			
QUARTERLY: _____			
OTHER: _____ (Specify)			