

WORKPLACE CAMPAIGN REPORTING FORM



LIVE UNITED

Please fill out this form completely. It is important for audit purposes and for the efficiency of the campaign. Upon completion of the campaign, enclose copies of all completed pledge forms and all gifts of cash and checks. Return this form and any unused campaign materials to the United Way office or call us for pickup. Thank you so much for helping to coordinate this project. Know that your efforts are going a long way toward improving lives here in Logan County!

www.uwlogan.org
 130 S. Main St. Suite 130
 Bellefontaine, OH 43311
 (937) 592-2886

Business Name: _____ Number of Employees: _____
 Address: _____ Employees Investing: _____
 City & Zip: _____ Telephone: _____
 Campaign Coordinator: _____ E-Mail: _____

**** PLEASE MAKE SURE THAT A COPY OF ALL PLEDGE FORMS IS ALSO SUBMITTED TO YOUR PAYROLL DEPARTMENT SO THEY CAN PROCESS THE DEDUCTIONS.** Date: ____/____/____

Donation Method	Number of Pledges	Total Amount Pledged	Total Amount Enclosed	Balance to be Paid
Payroll Deduction				
One-Time Cash				
One-Time Check				
Billed Pledge				
Credit Card Pledge				
Campaign Fundraisers				
Corporate Gift				
Grand Total				

HOW WILL YOU PAYOUT YOUR BALANCE?:
 We automatically pay UW bi-weekly
 We automatically pay UW monthly
 We automatically pay UW quarterly
 UW should bill us quarterly
 Other _____

Does your company allow new hires to enroll in payroll deduction for United Way year-round?
 Yes No

Authorized Signature: _____

2nd Signature: _____