

Campaign Report Envelope

United Way
of Marion County



Company Name _____

Employee Coordinator _____

TOTAL EMPLOYEES

First Report Additional Report Final Report

PLEASE DO NOT INCLUDE TOTALS FROM PREVIOUS ENVELOPES

	# of Givers	Total Amount
PLEGGED	Payroll Deductions	
	To Be Billed	
	Credit Cards	
	Subtotal Pledged Gifts	
ENCLOSED	Cash	
	Check	
	Fundraisers (Raffles, jeans day, bake sales, contests, etc.)	
	Subtotal of Enclosed Gifts	
Report Grand Totals		C

<p>_____</p> <p>Number of Leadership Givers (\$500 or greater)</p>
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A + B = C

SIGNATURE (Employee Coordinator or person preparing report)

DATE

UNITED WAY OFFICE USE

THANK YOU!

Received Date _____

Audit Date _____

Staff Initials _____