



# Campaign Report

**Organization/Company**

Name:

Address:

City/State/Zip:

Phone:

Email:

**Employee Campaign Coordinator**

Name:

Phone:

Email:

**CEO/Owner/Executive Director**

Name:

Total Number of Employees in Organization/Company:

Number of Pay Periods:

Date you will send the first check for this campaign to United Way?

Is this your final campaign report?  Yes  No

Report Prepared by:

Date:

**Contributions Enclosed: (Do not include any previously reported pledges)**

Type of Contribution	Number of Donors	Total Amount Pledged	Payment Enclosed	Amount Due
Payroll Deductions				
Cash Donations				
Check Donations				
Credit Cards				
Direct Bill				
<b>Employee Total</b>				
Special Event Donation				
<i>Check type of Corporate Gift below</i>				
<input type="checkbox"/> Corporate Match				
<input type="checkbox"/> Corporate Gift				
<b>Grand Total</b>				

Please check that you have everything included in your envelope:

- Copies of all pledge forms (Employee and Corporate)
- All cash and check donations
- A copy of your pledge spreadsheet
- A copy of this form
- Also email a copy of your pledge spreadsheet to [info@uwofsc.org](mailto:info@uwofsc.org)

**Thank you for supporting United Way of Sheboygan County**

Comments: