

CAMPAIGN REPORT FORM



United Way of
Waco-McLennan County

CHANGE DOESN'T HAPPEN ALONE

P.O. Box 7634 Waco, TX 76714
(254) 752-2753
www.UnitedWayWaco.org

Company/Organization Name _____

Address _____

City/State/Zip _____

FOR UNITED WAY USE ONLY

Batch No. _____

COMPANY UPDATE

Number of Employees (Givers and Non-Givers)

Billing Cycle Monthly Quarterly

Date Payroll Deduction Begins _____

Month of First Bill _____

CEO Name _____

Human Resources Contact _____

Contact Telephone Number _____

Billing Address _____

SUMMARY REPORT

This report is: (please choose one) Partial Final

PLEASE INCLUDE ONLY ATTACHED PLEDGES AND PAYMENTS Retain company and donor copy of pledge forms. Enclose United Way white copy.

SECTION 1

	No. of Givers	Pledge Amount <i>Add all gift amounts from pledge forms.</i>
Payroll Deduction		\$
One-Time Gift: Cash		\$
One-Time Gift: Check		\$
One-Time Gift: Credit Card		\$
TOTALS		\$

SECTION 2 (Complete Only If Applicable)

Special Event Fundraisers

Cash/Checks Enclosed from Event

\$

Type of Fundraiser (i.e., raffle, bake sale, etc.) _____

SPECIAL INSTRUCTIONS (If Applicable)

SIGNATURES

Company Coordinator _____

Date _____

Received By _____

Date _____

THANK YOU