

CAMPAIGN CLOSING ENVELOPE

Company Name: _____

Address: _____

CEO Name: _____

Phone Number: _____

Payroll Statement Address:

Payroll Contact Name: _____

Payroll Contact Email: _____

Today's Date: _____	Our company will remit payroll deduction to United Way
Today's Total: _____	☐ weekly ☐ monthly ☐ other (specify) _____
☐ Partial Report or ☐ Final Report	beginning on (date): _____
Campaign total to date: _____	Person preparing this report: _____
	Their email/phone # _____

Type of Contribution	# of Donors	Total Amount Pledged	Amount Enclosed
Corporate Contribution	N/A		
Employee Checks, Credit Card Info, and Direct Billing			
Employee Payroll Deduction			
Special Event Revenue			
Total			

-- Please include employee checks and donor option forms in envelope. --

For United Way Office Use Only				
Envelope #	Company Name	Account #	Date	Staff Member