


# CAMPAIGN ENVELOPE EXAMPLE

<b>CAMPAIGN REPORT ENVELOPE</b>			
Company Name: _____		 United Way of North Central Florida 6031 NW 1st Place Gainesville, FL 32607-2025 (352) 331-2800 (352) 331-2111 (fax) www.unitedwayncfl.org	
Address: _____			
Total Number of Employees (Required): _____			
Employee Number Verified By Human Resources: _____			
PLEASE COMPLETE THE FOLLOWING FOR CONTRIBUTIONS ENCLOSED IN THIS ENVELOPE ONLY			
This Report is:	Types of Pledges/Gifts	Number of Givers	Total Amount
<input type="checkbox"/> Partial	<b>Cash</b> (Enclose pledge cards attached to cash) DO NOT STAPLE		\$
	<b>Checks</b> (Enclose pledge cards attached to checks) DO NOT STAPLE		\$
	<b>Credit Card</b>		\$
	<b>To Be Billed/Stock Gifts</b> (Enclose pledge cards with signature and address)		\$
<input type="checkbox"/> Final	<b>Payroll Deduction</b> (Pledge forms: Yellow for Payroll Department, White for United Way)		\$
	<b>Special Events (Cash)</b>	N/A	\$
	<b>Special Events (Checks)</b>	N/A	\$
	<b>Corporate Pledge/Gift</b> (Enclose signed corporate pledge card) <input type="checkbox"/> Check Box if check is enclosed	N/A	\$
	<b>GRAND TOTAL</b>		\$
<input checked="" type="checkbox"/> I certify that the information above is correct <u>and all cash/checks are enclosed in this envelope.</u>			
Name: _____		Phone #: _____	
<small>(Employee Campaign Coordinator or Payroll Coordinator)</small>			
Signature: _____		Date: _____	
<b>United Way Employee Use ONLY</b>			
Company Account #: _____		Campaign Type:    United Way    FSECC	
Cash/Check Verified By Account Manager:		Cash/Check Audited By Finance Dept.:	
Name: _____	Name: _____	Name: _____	Name: _____
<small>Date</small>	<small>Date</small>	<small>Date</small>	<small>Date</small>
Signature: _____	Signature: _____	Signature: _____	Signature: _____
<small>Name</small>	<small>Name</small>	<small>Name</small>	<small>Name</small>
<small>Date</small>	<small>Date</small>	<small>Date</small>	<small>Date</small>

Special Thanks to our Academy Sponsors

