



UNITED WAY
of Central Texas

Campaign Report Envelope

4 N 3rd St | P.O. Box 1312 | Temple, TX 76503
254-778-8616 | www.UWCT.org

Firm Name _____ Date _____

Employee Campaign Coordinator (ECC) _____

Address _____ ECC Phone _____

City _____ State _____ Zip _____

This is a Partial Report Final Report (campaign complete)

Please do not include results from any previous report

Payroll deductions begin in January? Yes No If not, when? _____

Number of Payroll Periods _____

Payroll deduction funds will be sent to United Way office:

Monthly

Quarterly

Weekly

REQUIRED

Total Number of Donors _____

Total Number of Employees _____

- **Please be sure** this report reflects only Pledge Authorizations and Payments **enclosed** in this envelope. Check the Partial Report box if additional reports are to be made.
- Complete summary of this report on Lines 1 through 6.

Line No.		Number of Gifts	Total Amount Given
1	Payroll Deductions (Enclose employee listing sheet. Individual payroll cards must be retained by the payroll department.)		
2	Direct Billing (Enclose individual cards and listing sheet. Signatures and addresses are required.)		
3	Fully Paid Gifts (Enclose cash, checks, all cards, and listing sheet. Signatures are required.)		
4	Total Employee Gifts (Sum of Lines 1, 2, & 3)		
5	Corporate Gift (Enclose card. Signature required.)		
6	Grand Total All Gifts (Sum of Lines 4 & 5)		