

United Way of Southwest Minnesota Workplace Campaign Report

Please complete this report every time you are turning in campaign funds/pledge forms from your workplace

PLEASE DO NOT WRITE IN GRAY SHADED AREAS!

PLEASE FILL OUT THE FOLLOWING INFORMATION ON EACH REPORT TURNED IN.

COMPANY/ORGANIZATION NAME	
Name of Person completing report	
This report is: (please choose one)	<input type="checkbox"/> Partial Report <input type="checkbox"/> Final Report (no more funds expected)

PLEASE ONLY REPORT PLEDGES AND PAYMENTS TURNED IN WITH THIS REPORT.

Employee Contributions/Pledges	# of Donors	Total Pledges	Amount Enclosed	United Way Audited Amounts
One Time Gifts Cash/check		\$	\$	
Payroll Deduction Pledges		\$	\$	
Credit Card Pledges Please complete via our website		\$	\$	
Special Events		\$	\$	
Total Employee Donations This Report		\$	\$	
Corporate Contribution/Pledge Please fill out pledge form and indicate billing date if invoice is requested.		\$	\$	

NOTES:

PLEASE PROVIDE THE FOLLOWING ONCE EACH YEAR OR IF INFORMATION CHANGES.

Name of CEO/President	
Mailing Address	
City, State, Zip	
Telephone Number/Email	
Name of Campaign Ambassador	
Name of Payroll Contact	
Name of Billing Contact	
Number of Employees in UWSWMN Service Area:	

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