

# CAMPAIGN SUMMARY REPORT

To be completed by Payroll Department or Company Coordinator

Report Date: \_\_\_\_\_



## ADDRESS INFORMATION

Company Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Billing Address (if different) \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_

## GENERAL INFORMATION

Local CEO \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Payroll Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 HR Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Company Coordinator \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Number of Employees		Number of Pay Periods		This Report Is:	
Full Time _____	Part Time _____	Per Year _____	During These Months _____ - _____	_____ Partial	_____ Final

Please complete each section below as it applies to your employees/corporate UWSK pledges. If you have any questions regarding the completion of this report, please call 270-843-3205.

	Number of Donors	Total \$ Amount Pledged	Total \$ Amount Paid (Enclosed)	Balance Due
Payroll Deduction Pledges		\$		\$
Cash (Currency)		\$	\$	
Checks		\$	\$	
Bill Direct		\$		\$
Corporate Gift		\$	\$	\$
Special Event(s) (Currency)		\$	\$	\$
Special Event(s) (Checks)		\$	\$	\$
<b>GRAND TOTAL</b>		\$	\$	\$

**Corporate Billing Date:** (select one)    Monthly    Quarterly    One Time    Beginning on: \_\_\_\_\_  
(Date)

**Payroll Deduct Billing Date:** (select one)    Monthly    Quarterly    One Time    Beginning on: \_\_\_\_\_  
(Date)

**Leadership Giving:** (Gifts of \$1,000 or more)    Cash & Check totals verified by coordinator:  Yes  No \_\_\_\_\_  
(Signature)

**Number of Leadership Gifts in this package** \_\_\_\_\_    Cash & Check totals verified by United Way Rep:  Yes  No \_\_\_\_\_  
(Signature)

**FOR UNITED WAY USE ONLY**

Audited By: \_\_\_\_\_

Date: \_\_\_\_\_

Posted By: \_\_\_\_\_

Date: \_\_\_\_\_

**United Way of Southern Kentucky**  
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 Bowling Green, KY 42101  
 P: 270.843.3205  
 F: 270.843.3236  
 www.uwsk.org

Prepared by: \_\_\_\_\_

Signature: \_\_\_\_\_

(Please Print)

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_