## INSTRUCTIONS FOR COMPLETING REPORT ENVELOPE

- 1. Fill in your Company Name.
- 2. Total # Employed Locally. For an accurate percent participation calculation, it is important to know the number of local employees.
- 3. Is this a partial or final report? Check the appropriate box. If you have previously submitted a partial report, please DO NOT include that amount in this report.
- 4. Please enclose your COMPLETED Roster of Givers and check appropriate box.

## **ENVELOPE SUMMARY**

A. Cash/Checks Enclosed Fill in the Number of Donors Enclosed, Total Dollars Pledged and Total Payment Enclosed. Total dollars pledged and total payment enclosed SHOULD be equal.

If a donor is making a <u>partial payment on a pledge with this envelope</u>, use line B instead of A.

- B. <u>To Be Billed</u> Fill in the *Number of Donors Enclosed* and the *Total Dollars Pledged*. If someone is making a partial payment on a pledge, enter that payment in the *Total Payment Enclosed* box. Make sure pledge forms are filled out completely with name, address, and signature.
- C. Stock Please call the United Way office (269) 343-2524.

NON-PAYROLL TOTALS Total the Number of Donors Enclosed, Total Dollars Pledged and Total Payment Enclosed columns.

- D. Payroll Deduction Pledge Fill in the Number of Donors Enclosed and Total Dollars Pledged for these givers.
- E. Special Events Enter dollars raised through organized fundraising events and activities in the Total Dollars Pledged and Total Payment Enclosed box.
- F. CORPORATE PLEDGE ONLY

This is for the company's pledge, not the total collected from the company's employees. Make certain the corporate pledge form is signed, dated and enclosed.

5. PLEDGE FORMS: The total gift amount must be shown on each pledge form. Verify copies have been included in envelope by checking the appropriate boxes and the original has gone to the Payroll Department. DESIGNATION FORMS: Please check for completeness and confirm all designation forms have been signed. "One percent of salary" or "\$2 per paycheck" is not sufficient, and will require a phone call to the Employee Campaign Manager for the correct dollar figure.

7. Please specify whom UW Staff should contact for questions on payroll deduction pledges and payments.

8. Please specify the UW Staff person or Campaign Liaison who assisted with your campaign.

Original Pledge Form — Payroll Department
Copy of Pledge Form — United Way of the Battle Creek and Kalamazoo Region

When employees turn in their pledge forms, please verify that all checks and designation forms are turned in and attached to UW's copy of the Pledge Form.

**6.** Please remember to **sign**, **date**, **indicate your phone number and email address** on the "Report prepared by" line on front of envelope.

ENVELOPE		RECAP			YEAR
1Company Name					United Way  709 South Westnedge Avenue
2. Total # Employed Locally	REP	ORT E	NVELOPE		Kalamazoo, Michigan 49007-5099 <b>Phone:</b> (269) 343-2524 <b>Fax:</b> (269) 344-7250
3. Partial Report Final Report			uctions on back		
4. Completed Roster of Givers	1 10000		actionic on back		
Please report ONLY the amount in this envelope  For UW Use Only					
ENVELOPE SUMMARY	NUMBER OF DONORS ENCLOSED	TOTAL DOLLARS PLEDGED	TOTAL PAYMENT ENCLOSED	FOI OVV OS	Se Offiy
A. CASH/CHECKS ENCLOSED	DONORS ENCEOSED	1 LLDOLD	ENGLOSED	Account N	lumber
B. TO BE BILLED					
C. STOCK			**********		Done By Date
NON-PAYROLL TOTALS			**********	Envelope Summary	30.10 2,
D. PAYROLL DEDUCTION PLEDGES			**********	Audit	
	***************************************			Data Entry	
E. SPECIAL EVENTS				New Accts:	
F. CORPORATE PLEDGE ONLY (Report only if pledge form is enclosed)				Review/Close Update Details	
COLUMN TOTAL				Notes/Explanation of Changes	
(NON-PAYROLL TOTALS+E+F+G)				Trotos Explanation of changes	
<u>PLEASE NOTE:</u> Donors may pay their billed pled bill pay, via our website at www.changethestory.or, phone directly to the UW office. We value your relationships.	g, or by providing	credit card inf		Person responsible for processing pay	rroll deduction pledges:
5. The total gift amount must be shown on each pledge form.				(Name)	/(Phone)
<ul><li>□ Original Pledge Form Payroll Department</li><li>□ Copy of Pledge Form United Way of the Battle Creek and Ka</li></ul>	lamazoo Region				<u> </u>
When employees turn in their pledge forms, please verify that all checks and designation forms are attached to UW's copy of the				(Email)	
Pledge Form. Thank you.	,	Data		8. UW Staff/Campaign Liaison	
6. Report prepared by:(Please PRINT Name )		Phone)	/		
				Envelope picked up by:	
Email address:					

Date envelope was picked up: \_\_\_\_

13/1500