**** ****

Name:

Company Name:

Address:

City: McPherson

State/Zipcode:

Phone Number:

kathyr

**COMPANY REPORT ENVELOPE**

**INSTRUCTIONS**

 • How many employees do you currently have? \_\_\_\_\_\_\_

 • Record your employee campaign results in the spaces provided below.

**EMPLOYEE CONTRIBUTIONS**

|  |  |  |
| --- | --- | --- |
| **COLLECTION METHOD** | **# OF EMPLOYEE DONORS** | **TOTAL PLEDGES** |
| **A. Cash Payments** |  | **$** |
| **B. Payroll Deductions** |  | **$** |
| **C. Direct Billing** |  | **$** |
| **TOTALS (A+B+C)** |  | **$** |

**BUSINESS/COMPANY CONTRIBUTIONS**

|  |  |  |
| --- | --- | --- |
| **CORPORATE MATCH** | **COMPANY PLEDGE** | **BALANCE DUE** |
| **⃝ YES****⃝ NO** | **$** | **$** |

**SPECIAL EVENTS & FUNDRAISERS**

|  |  |
| --- | --- |
| **EVENT DESCRIPTION** | **AMOUNT RAISED** |
|  |  **$** |
|  |  **$** |

**TOTAL CONTRIBUTIONS**

|  |  |
| --- | --- |
| **EMPLOYEE + BUSINESS + SPECIAL EVENTS** |  **$** |

**UNITED WAY OF MCPHERSON COUNTY**

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