

United Way of the Virginia Peninsula
CAMPAIGN REPORT ENVELOPE

Questions? Call your United Way Representative
 757-873-9328



Two City Center
 11820 Fountain Way, Suite 206
 Newport News, VA 23606
 www.uwvp.org

Envelope Number	Deposit Date
Rec'd Date	Completed

UNITED WAY USE ONLY

COMPANY INFORMATION

Company Name: _____

Company Address: _____

Campaign Coordinator Name: _____

Total # of Employees in organization: _____

****MANDATORY** PAYROLL CONTACT INFORMATION**

Contact Name: _____

Phone: _____

Email: _____

Deadline you need donor upload by: _____

CORPORATE GIFT OPTION

Select one of three options:

1) CHECK ENCLOSED \$ _____

2) PAYROLL MATCHING \$ _____ OR% _____

3) SEND AN INVOICE \$ _____

One Time Bill _____ Mo/yr

Quarterly Bill Starting _____ Mo/yr

Monthly Bill Starting _____ Mo/yr

EMPLOYEE DONATIONS

METHOD OF PAYMENT	# NUMBER OF PLEDGES	\$ PLEDGE TOTAL	UW use
PAYROLL DEDUCTIONS	#	\$	
CASH	#	\$	
CHECK	#	\$	
CREDIT CARD	#	\$	
DIRECT BILL/ BILL ME	#	\$	
SUBTOTAL	#	\$	
	Corporate Gift	\$	Smartcards Needed:
	Special Fundraisers/Events	\$	
GRAND TOTAL		\$	