

United Way of Norman Campaign Report

LIVE UNITED



570 24th Ave. NW, Ste. 110
 Norman, OK 73069
 Phone: 405.329.2025
 unitedwaynorman.org

Company Name: _____

Total Number of Employees at Company: _____

1 Payroll Contact Name: _____ Email: _____ Phone: _____

Payroll billing address: _____
City, State and Zip Code

Date that payroll deductions begin: _____

How many pay periods in your year: 12 24 26 52

Pledge reminders will NOT be sent unless checked: Monthly Other: _____

2 Employee Pledge Only

FINAL report PARTIAL report

	# of Donors	Total Contributions	Amount Enclosed <i>(must be completed)</i>
Fundraisers/Special Events.....		\$ _____	\$ _____
Paid Contributions..... (enclose cash and checks)	_____	\$ _____	\$ _____
Payroll Deductions..... (retain yellow copy of pledge card for payroll)	_____	\$ _____	
Pledges to be Billed and/or Credit Card..... (considered unpaid until processing is complete)	_____	\$ _____	
TOTAL (do not include any previous report totals)	_____	\$ _____	\$ _____

	Pledged	Payment Enclosed	Balance Due
3 Corporate Pledge Only	\$ _____	\$ _____	\$ _____
We match our employees' contribution: <input type="checkbox"/> Dollar per Dollar <input type="checkbox"/> .50 per Dollar <input type="checkbox"/> Other: _____			
Comments: _____			
Corporate Pledge Contact Name: _____ Email: _____ Phone: _____			

4 Preparer's Printed Name: _____ Date: _____

Preparer's Email: _____

Preparer's Signature: _____ Phone: _____

UNITED WAY USE ONLY

Staff Initials: _____ Date: _____