Campaign Report Form

United Way of Tampa Bay
5201 W. Kennedy Blvd., Suite 600
Tampa, FL 33609
Tel: (813) 274-0900

www.unitedwaytampabay.org

Do Not Mail This Envelope

Call your United Way Representative for pick-up.
(813) 274-0900

United Way of Tampa Bay

Organization Name & Address:

_____

_____

_____

_____

Corporate Billing Address
Please include if corporate and employee gifts are to be billed to separate addresses.

_____

Total Number of Employees: _____

Coordinator Name:_____

Phone # _____

For United Way Use Only

Account Number _____/_____

Envelope #_____

DES_____

Deposit Date_____/_____/_____

Status: ☐ Partial ☐ Final ☐ Additional

Campaign Year _____

LE_____ Staff_____ Audit_____

Employee Donations Enclosed (Please do not include previously reported information.)

Type of Donation	Number of Donors	Total $ Amount Pledged	Total $ Amount Enclosed
A. Payroll Deduction			
B. Cash			
C. Checks *Payable to "United Way."*			
D. Other *Credit Card, Securities or Bill @ Home ($50 min.)*			
E. Special Events Proceeds			
Report Totals: Add columns from top-to-bottom	Total # of Donors	Total $ Amount Pledged	Total $ Amount Enclosed

Corporate contribution $_____ [ ] Enclosed
[ ] Quarterly (to begin) ___/___/___ [ ] Other (specify) ___/___/___

Is this the final campaign report? ☐ Yes ☐ No

Enclosed within this envelope:

- ☐ Cash
- ☐ Checks (made payable to United Way of Tampa Bay)
- ☐ Credit/Debit Information
- ☐ Securities Information ☐ Bill @ Home Information
- ☐ Campaign Listing Sheet (Please include $500+ donor pledge forms)
- ☐ Corporate Gift
- ☐ Special Event(s) proceeds
- ☐ **Please include copies of all donor pledge forms**

Workplace Coordinator Signature:_____ Date:_____

United Way Representative Signature:_____Date:_____