

# United Way Campaign Report Packet



**UNITED WAY**  
Fort Smith Area

120 North 13<sup>th</sup> Street  
Fort Smith, AR 72901  
479-782-1311

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Campaign Coordinator \_\_\_\_\_

Campaign Coordinator Email \_\_\_\_\_

Campaign Coordinator Phone Number \_\_\_\_\_

**TOTAL number of  
employees at your  
organization.**

\_\_\_\_\_

	Number of Donors	Pledge Amount	Amount Paid Now
<b>Corporate Gift</b> Contribution from company. Please DO NOT count employer contribution with this number	N/A		
<b>Employee Gifts</b> (Cash, Check, Credit Card, Direct Bill)			
<b>Payroll Deductions</b>			N/A
<b>Special Fundraisers</b> Include the total amount raised through special events (i.e., bake sales, car washes, lunches, auctions, etc.)	N/A		
<b>TOTAL</b>			

**Before you seal this envelope, include a copy of all pledge cards.  
What date will you begin deductions for this campaign?**

\_\_\_\_\_

**Do you prefer your payroll deduction statement be (Check one):**

Mailed ( ) or Emailed ( )

*Thank You*

**For United Way Office Use Only**

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Data entered by: \_\_\_\_\_

Date: \_\_\_\_\_

Packet Number: \_\_\_\_\_