Cooke County
UNITED WAY

CAMPAIGN REPORT SHEET

EMPLOYEE GIFT DIVISION

Date: _____ Campaign Year:_____

Name of Company: _____

Mailing address: _____

_____State: _____ZIP: _____

Business Phone: _____

Campaign Coordinator : _____ Phone: _____

Email: _____

Total # of Employees: _____

Please list name of each individual giver and note type of pledge given:

Name (Last name first)	Amount Pledged	Amount Paid	Cash or Check	Chisolm Trail Level	Payroll Deduction	Direct Bill	Balance Due
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

TOTALS **$_____** **$_____** **$_____**

Place this report in the Report Envelope & return along with pledges collected to: Cooke County United Way 940-665-1793

YOU MAY PHOTOCOPY THIS PAGE AS MANY TIMES AS NEEDED, OR YOU MAY USE YOUR OWN FORM, AS LONG AS ALL ABOVE INFORMATION IS INCLUCED.