

# Arrowhead United Way 2008-2009 EMPLOYEE CAMPAIGN REPORT FORM



**Arrowhead United Way**

<b>Organization Name</b> _____	<b>Total Number of Employees at time of campaign</b> _____
<b>Address</b> _____	<b>Phone</b> _____
<ul style="list-style-type: none"> <li>■ Attach yellow copy of pledge forms, cash, checks and donor designation forms to this report form.</li> <li>■ Submit form when the majority of pledges have been returned.</li> <li>■ Copy this form to submit additional pledges as necessary.</li> <li>■ Once completed, call your AUW representative at (909) 884-9441.</li> </ul>	

## Donors and Pledges

Type of Gift or Pledge	Number of Donors	Dollars Raised
Payroll Deductions <i>(please annualize)</i>		
Cash and Checks		
Credit Cards		
<b>Total</b> <i>(for this report only)</i>		

Special Events		
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**Employee Campaign Coordinator:**

**X** \_\_\_\_\_  
Name *(please print)* Phone \_\_\_\_\_

**X** \_\_\_\_\_  
Signature Date \_\_\_\_\_

**AUW Staff:**

\_\_\_\_\_  
Name *(please print)* Date \_\_\_\_\_

**Arrowhead United Way**  
P.O. Box 796  
San Bernardino, CA 92402  
P: (909) 884-9441 F: (909) 885-4096  
[www.arrowheadunitedway.org](http://www.arrowheadunitedway.org)

**For Arrowhead United Way Use Only**

\_\_\_\_\_ Account Number \_\_\_\_\_

This Report is \_\_\_\_\_ Partial \_\_\_\_\_ Final

\_\_\_\_\_ File Number \_\_\_\_\_ Envelope Number \_\_\_\_\_

\_\_\_\_\_ Cash \_\_\_\_\_ Checks \_\_\_\_\_ Date \_\_\_\_\_

Comments:

