UNITED WAY OF ETOWAH COUNTY CORPORATE & EMPLOYEE 2007-

2007-08 Campaign

Company Name

Company Address

City State Zip Code

Section 1 CORPORATE PLEDGE

Does your company have an internal matching gifts program? ☐ Yes ☐ No ☐ Percentage

A. Corporate Gift $, .

B. Paid now , .

C. Balance Due $, .

Balance to be paid: ☐ Monthly ☐ Quarterly ☐ Other _____

Section 2 EMPLOYEE PLEDGE SUMMARY

Total number of employees in organization:

Type of Pledge/Payment	**Dollar Amount**	**Number of Donors**
A. Payroll Deduction	$, .	
B Credit Card	, .	
C. Stock	, .	
D. Direct Bill ($50 or more)	, .	
E. Cash/Checks	, .	
Total Employee Giving	$, .	
F. Special Events Proceeds	$, .	

Frequency of payments to United Way: ☐ Monthly ☐ Quarterly ☐ Other _____

Please bill our company as indicated above: ☐ Yes ☐ No

Section 3 PLEASE REMEMBER TO

☆ Enclose or e-mail excel summary of employee giving spreadsheet **or**

☆ Enclose copies of employee pledge forms or a listing of employee contributions that includes:

1 designation information, if applicable, with donor address

2 leadership givers list including permission to print names in the leadership brochure, how to print and spouse's name if giving jointly

3 signed pledge forms for bill direct, stock, and credit card pledges

☆ Enclose check and cash contributions attached to pledge forms

☆ Give a copy of the payroll deduction pledge forms to your payroll department

Signature and Title E-Mail Address Date