

# Campaign Report

msaunitedway.org



Following your workplace campaign, please complete and submit this form with the white copies of the employee pledge forms. Please return to the United Way office by **Friday, November 6**. If you have questions, contact the United Way Office at 701.255.3601.

**Partial Report**  
(more gifts will be coming)

**Final Report**  
(No more gifts are expected)

Company/Agency \_\_\_\_\_

Address:

CEO/President/Agency Director \_\_\_\_\_

Report Prepared by _____	HR/Payroll Name _____	Employee Campaign Manager _____
Phone _____	Phone _____	Phone _____
Email _____	Email _____	Email _____

**Number of Employees at company/agency:**

**# Full Time:** \_\_\_\_\_ **# Part Time:** \_\_\_\_\_

**Company's campaign timeline**

**Started** \_\_\_\_\_ **Ended** \_\_\_\_\_  
MM/DD MM/DD

**Total \$**                      **Number of employees giving**

Payroll deductions				
Begin Date _____				
Cash				
Checks				
Credit Cards				
Direct bills				
<b>Employee Totals</b>				
Corporate gift				
Special Events				
<b>Total gift to United Way</b>				

For United Way Use Only

