

REPORT ENVELOPE

United Way
of the Southern Tier



300 Nasser Civic Center Plaza, Suite 220, Corning, NY 14830 | (607) 936-3753 | www.uwst.org

For United Way Use Only:

Envelope #:	Account #:	Deposit Date:	Posted in Andar - Initials & Date:
-------------	------------	---------------	------------------------------------

**** MUST BE FILLED OUT COMPLETELY FOR VERIFICATION AND FRAUD PROTECTION ****

Name of Organization:	
Main Address:	
Billing Address (if different):	
Company Coordinator Name:	
Coordinator Phone:	Coordinator Email:
Total # of Employees:	<input type="checkbox"/> PARTIAL REPORT <input type="checkbox"/> FINAL REPORT

IMPORTANT: Totals below should agree with envelope contents. Do not include e-pledge transactions.

EMPLOYEE GIVING	# OF DONORS	TOTAL CONTRIBUTIONS	CASH/CHECK IN ENVELOPE	UWST USE ONLY
Employee Payroll Deductions				
Cash/Checks (Paid In Full Contributions)				
Credit Card Contributions				
Employees To Be Billed By United Way				
Special Events/Fund Raising Events				
CORPORATE GIFT				
ENVELOPE TOTAL	Total # Donors	Total Contributions	Total Cash/Checks	

How will <u>PAYROLL GIVING</u> be remitted?	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Bi-weekly
How will the <u>CORPORATE GIFT</u> be remitted?	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Once

(If a selection is not made, a monthly statement will be mailed beginning April 2020)

By signing below, I certify the contents of this envelope match the amounts and totals above.

Name: _____ Signature: _____ Date: _____

THANK YOU!