

United Way of Kershaw County 2022 Partner Agency Campaign Report Form

Campaign Dates:		Begin:		End:	
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Division:	Public
Partner Agency Name:	
Address:	
Contact Person:	
Contact Person Telephone:	

EMPLOYEE STATISTICS

Actual

- | | |
|---|-------|
| A. Total number of employees | _____ |
| B. Number of employee givers | _____ |
| C. Total # of Leadership Givers (\$500+) <i>See attached form</i> | _____ |

CAMPAIGN RESULTS

- | | | |
|--|-------|----------|
| 1. CASH | TOTAL | \$ _____ |
| 2. CHECKS | TOTAL | \$ _____ |
| 3. PAYROLL DEDUCTION
Date Payroll Deduction will begin:
Frequency of Payments: ___monthly ___quarterly other: ___ | TOTAL | \$ _____ |
| 4. TO BE DIRECT BILLED
<i>(Enclose signed pledge cards with billing addresses)</i> | TOTAL | \$ _____ |
| 5. TOTAL EMPLOYEE CONTRIBUTION (1+2+3+4) | | \$ _____ |
| 6. DESIGNATIONS <i>(Include in totals above)</i>
Attach a list of designations divided into the following categories.
A. United Way Partner Agencies.
B. Other United Ways. | | |

BOARD MEMBER/ADVISORY BOARD PARTICIPATION

Board member participation results:

- | | |
|--|----------|
| A. Number of board members: | _____ |
| B. Number of board members giving: | _____ |
| C. Percent Participation (B / A = C) | _____ % |
| D. Total projected giving by the board | \$ _____ |
| E. Per Capita Gift (D / A = E) | _____ % |

Name of person who will remit payroll deductions to United Way:	
Person completing this report:	
Date of report:	

Mail to: United Way, P.O. Box 737, Camden, SC 29021
PHONE: 803-432-0951 OR 803-420-2375
For additional forms and/or information refer to our website: www.uwkc.net.