For Internal Use Only	ACC#:
	-
United Way Staff	



Please do not mail. Call 321-631-2740 for pick up.		United Way of Brevard		
Organizational Information		Reporting Contact		
Organization		Name		
ECM Name		Email		
ECM Email		Phone		
How many employees do you have?				
Organizational Giving Summary	<i>Do not ii</i> # of Donors	nclude previously reported p Total Pledges	oledges in this report envelope. Total Payment Enclosed	
A. Corporate Giving		Ţ.	,	
1. Cash				
2. Checks				
Total A (A1+A2)				
B. Employee Giving				
1. Cash				
2. Checks				
3. Credit Cards				
4. To Be Billed				
5. Payroll Deductions				
Total B (B1+B2+B3+B4+B5)				
C. Special Events				
1. Cash				
2. Checks				
Total C (C1+C2)				
Total Giving Summary (A+B+C)				
Submitted by	Date	Email		
Title	Company Representative Signature			