

Employer___

Community Shares of Wisconsin

Campaign Report Form

PLEASE FILL IN COMPLETELY

1 /			
Address			
City S		e Zi _l	p
Campaign Coordinator	Telephone		
Number of Employees at Workpl	ace		
REPORT ONLY PL	EDGES AND PAYMENT	S NOT PREVIOUSLY RE	PORTED
Type of Contribution	Number of Contributions	Total Amount of Contributions	Amount Paid Now
Cash/check gift			
Credit card pledges			
"Bill me" pledges			
Payroll contribution pledges			
Corporate contribution Matching? Yes No	N/A		
Special Event Describe:	N/A		
GRAND TOTAL			
Partial Report		Final Report	
Completed by		Date	

INSTRUCTIONS:

- 1. Complete this report and make a copy for your records.
- 2. Balance the total cash and checks against this campaign report.
- 3. Return the following items, sealed in this envelope.
 - a. White (top) copies of all completed pledge forms (Employer retains yellow copy for payroll; employee retains pink copy)
 - b. All personal and bank checks, made out to **Community Shares of Wisconsin**.
- 4. Mail to Community Shares of Wisconsin or call for pick up.

Thanks for your help! Community Shares of Wisconsin 612 W. Main Street, Suite 200, Madison, WI 53703 Phone: 608-256-1066 Fax: 608-256-8823 Email: csw@communityshares.com