

COMPANY INFORMATION

Company Name: _____

Company Coordinator: _____

Email: _____

Payroll/Finance Contact: _____

Email: _____

Number of FTE Employees: _____

Phone: _____

Mailing Address:

Street

City, State Zip

Preferred Billing Method:

☐ Email ☐ Mail

Preferred Billing Cycle (if applicable):

☐ Annually ☐ Monthly
☐ Quarterly

Campaign Recognition: Please indicate whether your organization authorizes public recognition for its participation in the campaign. ☐ Yes ☐ No

PLEDGE INFORMATION

TYPE OF GIFT	NUMBER OF DONORS	TOTAL	BILLING
Corporate Donation*	-	\$	☐ Check/Cash Received ☐ Invoice
Special Event Proceeds	-	\$	☐ Check/Cash Received ☐ Invoice
Payroll Deductions		\$	See Pledge Forms
One-Time Employee Gifts		\$	See Pledge Forms
TOTAL	#	\$	

**If making a corporate donation with designations to agencies, please provide itemized list at time of submission.*

Payroll Deductions will be sent to UW Valleys: ☐ Bi-weekly ☐ Monthly ☐ Quarterly

☐ Other: _____

Number of Pay Periods Per Year: _____

Payroll Deduction to Begin: _____

Month/day/year

Please submit this form along with completed employee pledge forms (via USPS mail or email) or contact
Megan Hausch, Director of Development, megan.hausch@uwvalleys.org to arrange pick up.

THANK YOU!

www.uwvalleys.org
 @uwscrcv

Hudson Office
 201 Second Street South, Suite 300
 Hudson, WI 54016

Menomonie Office
 800 Wilson Avenue, Suite 51
 Menomonie, WI 54751

UW Valleys Staff - Internal Use Only

Presentation Date	Lead UW Staff Contact	Invoice Schedule/Dates	Designation/Allocation Payment Schedule	Pledge Information Processed in Salesforce, (Date/Staff Initials)