UNITED WAY
St. Croix and
Red Cedar Valleys

WORKPLACE CAMPAIGN COVER SHEET 2026-2027

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
*Paper Pledge Forms Payroll Deduction Totals	#:	$	See pledge forms
To be completed by UW Staff Online Pledge Form Totals	#:_____	$:_____	See pledge forms
TOTAL	#	$	Paper form only total
To be completed by UW Staff COMBINED TOTALS:	#	$	Online pledge + paper pledge forms

**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, Interim Executive Director, 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 Detail*	*Pledge Information Processed in Salesforce, (Date/Staff Initials)*