## **MONADNOCK UNITED WAY**

## Corporate and Employee Report Envelope

oaned Employee Name:		
mail:	Phone:	
Campaign Coordinator Name:		
mail:	Phone:	
Payroll Controller Name:		
mail:	Phone:	
CA	MPAIGN DATA	
Total number of employees in your company (regardless of wh	nether they pledged or not):	
IMPORTANT INSTRUCTIONS: Please complete the inform		
Please include original copies of pledge forms, all cas	h/check contributions, and any oth	er relevant information. <b>Please</b>
	h/check contributions, and any oth	er relevant information. <b>Please</b>
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