## **YOUR CAMPAIGN PLAN**

Your own internal pledging system

We're excited to make sure you have a successful campaign!

COORDINATOR INFORMATION			
СОМР	NY:		
	INATOR NAME(S):		
EMAIL ADDRESS(ES):			
CAMPAIGN INFORMATION			
CAMPAIGN DATES:			
PAYROLL DEDUCTION START DATE:			
NUMBER OF EMPLOYEES:			
How d	you plan to accept employee pledges?		
	aper pledge forms (from Heart of Arkansas United Way)		
	rigital pledge forms through United Way website (please complete digital pledge details form)		



## **DIGITAL CAMPAIGN DETAILS**

## PLEDGE OPTIONS

Choose from the following pledge type opti	ions:	
☐ Payroll Deduction		
Credit or Debit Card		
☐ Cash (Please provide instructions on where	ash (Please provide instructions on where cash should be delivered below)	
☐ Check (Please provide instructions on whe	re check should be delivered below)	
Designations:		
5 5	their gift to the United Way Community Investment Fund, inancial Security, Healthy Community, and Community ice agency.	
☐ Yes, we are offering designations.		
☐ No, we are not offering designations.		
CAMPAIGN REPORT ACCESS		
	ive user access to download employee pledge data.	
☐ All coordinators listed on our Campaign Inf		
Name:	Title:	
Email:	_	
Name:	Title:	
Email:	-	
Name:	Title:	

