

Workplace Giving Envelope Checklist for Ambassadors

1. Prepare Envelope Contents

Separate donation payment types:

- CASH one pile each for Employee Contributions and Special Events
- CHECKS one pile each for Employee Contributions, Special Events and Corporate Contributions
- CREDIT CARDS one pile each for One-time & Sustaining. Be sure the following are complete:
 - o Card number
 - Expiration Date
 - Full address
 - Signature
- **PLEDGE FORMS** each donation should have a Pledge Form (except for Special Events donations). Be sure the following are complete:
 - Full address
 - Signature
- PAYROLL DEDUCTIONS You (the Ambassador) are responsible for making copies of all Payroll Deduction Pledge Forms and providing these to your company payroll department. Include originals in envelope. Be sure the following are complete:
 - Number of paychecks affected
 - Amount deducted from each paycheck
 - Amount of total gift

2. Complete Envelope Form

- Section 1 handwritten, stamp or label is fine
- Section 2 this section is required if there are Payroll Deductions
- Section 3 do not include online pledges or previously reported pledges unless an employee makes a
 pledge via the online tool and cash/check is placed in the envelope

3. Assemble Envelope

- Bundle all payments by section, place the contents in an envelope, include completed envelope form and completely seal the envelope. Feel free to attach notes to any pledge forms or bundles that you feel may need additional clarification.
- If there is cash, please contact your Loaned Executive to arrange a pickup. If there's not cash, please sign your name across the seal and mail the envelope to:

United Performing Arts Fund 301 W. Wisconsin Ave, Ste 600 Milwaukee, WI 53203

Thank you for serving as a UPAF Workplace Giving Ambassador! If you have any questions about the envelope process, please call the UPAF office at 414-273-UPAF (8723).



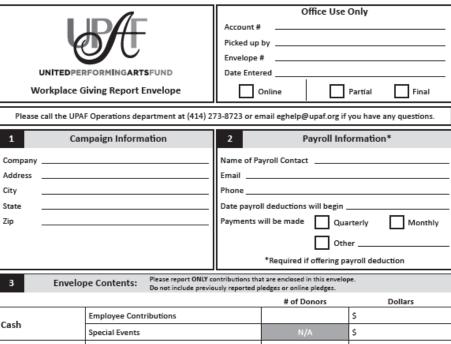
Workplace Giving Envelope Checklist for Ambassadors

YES, I WILL HELP LOCAL ARTISTS AN Donate at UPAF.org/donate or fill out		
Name		
Name:Address:		
City, St, Zip:		
	7 Home	□ Work
Email:		
With my gift of \$1,000 to \$4,999, please designate 10% to (cl		ion UPAF
with my gift of \$300+. I would like to be a member of UPAF Notable Women with m I would like to learn about Planned Giving through my estate	y gift of \$	\$1,000+.
Workplace Giving Envelope		
Checklist		
<u></u>		
Section 1 – handwritten,		
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stamp or label is fine		
Section 2 – this section is		
required if there are Payroll		
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Deductions		
Section 3 – do not		
include online pledges or		
, -		
previously reported pledges		
unless an employee makes a		
pledge via the online tool		
and cash/check is placed in		
the envelope		
,		
Bundle all payments by		
section, place the contents		
1		
in envelope and completely		
seal the envelope		
Sign your name across		
Sign your name across		
the seal		
Arrange for pickup or		
mail envelope		
Have a great day! 😊	1	

□ One-Time □ \$100 □	1\$300 □\$50	e: It time of receipt) O \$1,000 \$ (charged to your credit card e.	ach month)
□ \$10 □	\$25 🗆 \$45 [⊒\$85 □\$pe	r month
		cted from your paycheck by yo pay periods = \$	
☐ CHECK end	losed, made pa	llowing payment methods: ayable to UPAF	
CHECK end CREDIT CA Card #:	losed, made pa RD 🗖 Visa	ayable to UPAF MasterCard Discover	
CHECK end CREDIT CA Card #: Exp. Date: BILL ME BY	losed, made pa RD	ayable to UPAF MasterCard Discover	k of card):

Pledge Form Checklist

__ Complete address and contact info __ Is it a payroll deduction? If yes, write number of pay periods. __ Is it credit card payment? If yes, write number and expiration date



Do not include previously reported pledges or online pledges.					
		# of Donors	Dollars		
Cash	Employee Contributions		\$		
	Special Events	N/A	\$		
Checks (Match each check to corresponding pledge card. No staples.)	Employee Contributions		\$		
	Special Events	N/A	\$		
	Corporate Contribution	N/A	\$		
Credit Cards (Please be sure pledge cards are completed & signed.)	One-Time		\$		
	Sustaining (Please enter the dollar amount to charge per month.)		s		
Pledges to be Billed (Pledge card must include address info.)			\$		
Payroll Deduction (Please make copies of PD cards. Send the originals to UPAF and provide copies to your payroll department.)			s		
	TOTAL		\$		

Report Completed By:	Print Name	Date:	
mail:		Phone:	