



## Workplace Giving Envelope Checklist for Ambassadors

### 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** – be sure the following is completely filled out:
  - 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 is completely filled out:
  - 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 is completely filled out:
  - Number of paychecks affected
  - Amount deducted from each paycheck
  - Amount of total gift

### Complete Envelope

- **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***

### Assemble Envelope

- Bundle all payments by section, place the contents in envelope and completely seal the envelope. Feel free to attach notes to any pledge forms or bundles that you feel may need additional clarification.
- Sign your name across the seal
- Notify your Loaned Executive that the envelope is ready to be picked up. ***To ensure the security of the contents of the envelope(s), Loaned Executives cannot leave a workplace with an envelope that has not been properly completed or sealed.***

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



## Workplace Giving Envelope Checklist for Ambassadors

I WOULD LIKE TO MAKE A GIFT OF:

☐ PAYROLL DEDUCTION

Amount per pay period: ☐ \$5.00 ☐ \$10.00  
☐ \$25.00 ☐ Other \_\_\_\_\_

OR

Deduct: \$ \_\_\_\_\_ x \_\_\_\_\_ pay periods

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, St. Zip: \_\_\_\_\_

☐ I want to be a member of Next Generation UPAF (age 45 and under and gift of \$500 or more).

☐ Renew my membership or designate my new or increased gift of \$1,000 or more to UPAF Notable Women.

☐ Please waive my UPAF benefits.

☐ Cell ☐ Home ☐ Work

Preferred Phone \_\_\_\_\_

Preferred Email (Required to receive full donor benefits.) \_\_\_\_\_

MWPG19

☐ Check enclosed, made payable to UPAF

☐ Credit Card ☐ Visa ☐ MasterCard ☐ Discover ☐ AmEx

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

☐ Charge this amount one time: \$ \_\_\_\_\_

OR

☐ Charge \$ \_\_\_\_\_ monthly x \_\_\_\_\_ months: \$ \_\_\_\_\_

First of the month, maximum 12 months, \$10 total gift minimum.

☐ Bill me (\$10 total gift minimum):

☐ Monthly ☐ End of year \$ \_\_\_\_\_

Balance due end of calendar year. Address required.

MY TOTAL UPAF GIFT: \$ \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

UPAF is a nonprofit 501(c)(3) organization. Your payment to UPAF is deductible to the fullest extent allowed by the law. Consult your tax advisor to determine the deductibility of your payment. 301 W. Wisconsin Ave., Suite 600, Milwaukee, WI 53203 | 414-273-UPAF (8723) | www.UPAF.org

### 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

2020

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\_\_\_ 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**

\_\_\_ Bundle all payments by section, place the contents in envelope and completely seal the envelope

\_\_\_ Sign your name across the seal

\_\_\_ Notify your Loaned Executive that the envelope is ready to be picked up

Have a great day! 😊

UPAF UNITED PERFORMING ARTS FUND Workplace Giving Report Envelope		Office Use Only	
Account # _____ Picked up by _____ Envelope # _____ Date Entered _____ <input type="checkbox"/> Online <input type="checkbox"/> Partial <input type="checkbox"/> Final		Please call the UPAF Operations department at (414) 273-8723 or email <a href="mailto:eghelp@upaf.org">eghelp@upaf.org</a> if you have any questions.	
<b>1 Campaign Information</b> Company _____ Address _____ City _____ State _____ Zip _____		<b>2 Payroll Information*</b> Name of Payroll Contact _____ Email _____ Phone _____ Date payroll deductions will begin _____ Payments will be made <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____ <small>*Required if offering payroll deduction</small>	
<b>3 Envelope Contents:</b> Please report <b>ONLY</b> contributions that are enclosed in this envelope. 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.)			\$
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.)			\$
<b>TOTAL</b>			\$

Report Completed By: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_