

Campaign Supply Request Form

Company:_____

	resentative:
Phor	ne:
Ema	il:
<u>C</u>	Campaign Supplies: Enter the amount needed.
Uni	ited Way Campaign Posters:
	ited Way Pledge Cards
Uni	ited Way Donor Reports (handouts):
Uni	ited Way DVD (campaign video):
Fan	mily Wize Prescription Discount Card:
	yal Contributor Stickers (Donors who have given to any UW for 10 years or mor
	sual Day Stickers:
	ited Way Yard Sign:
	United Way Giveaways
	(While Supplies Last)
	1 item 2 items 3 items
	1 icii 2 iciiis 5 iciiis
Small	Medium Large X-large 2X 3X
If Speak	ker Requested, please provide the following information:
United Way S	Speaker:YesNo Agency SpeakerYesNo
United Way S Date of Event	Speaker:YesNo Agency SpeakerYesNo
United Way S Date of Event Time of Even	Speaker:YesNo Agency SpeakerYesNo t: tt:
United Way S Date of Event Time of Even Location of E	Speaker:YesNo Agency SpeakerYesNo t: tt: Event:
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United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: t: vent: vent (if different from above): e Number (if different from above):
United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: tt: Event: vent (if different from above):
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United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: t: vent: vent (if different from above): e Number (if different from above):
United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: tt: tvent: vent (if different from above): e Number (if different from above): il Address (if different from above):
United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: tt: tvent: vent (if different from above): e Number (if different from above): il Address (if different from above):
United Way S Date of Event Time of Even Location of E Contact for E Contact Phone	Speaker:YesNo Agency SpeakerYesNo t: tt: tvent: vent (if different from above): e Number (if different from above): il Address (if different from above):
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