



United Way of Northern Shenandoah Valley

# UWNSV CAMPAIGN FINANCE SHEET

**\* Please complete and return with campaign envelope \***

**Company/Organization** \_\_\_\_\_

**Campaign Year** \_\_\_\_\_

**Payroll deductions will begin on** \_\_\_\_\_

**Payroll deductions Schedule** (Please check only ONE)

Weekly (52-Pay Periods)

Monthly (12-Pay Periods)

Quarterly (4x per year)

Bi-Weekly (26-Pay Periods)

Semi-Annually (Twice per year)

Annually (Once per year)

Semi-Monthly (24-Pay Periods)

Custom

**Preferred payment method**

Check  
*Payable to United Way NSV*

Electronic Funds Transfer (EFT)  
*set up instructions will be emailed*

**Company Finance Contact Information**

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_



**Please notify us of any payroll updates, turnovers, or new hires wishing to participate.**

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