SECGC Paper Donation Summary Sheet

Please print, complete, and attach to envelope containing all of your department's paper donations for the week

Week ending: _____

Department/Agency Name: _____

Coordinator Name: _____

Donor Name	Payroll Deduction Donation Amount	Cash Donation Amount	Check Donation Amount	Total Donation
1	$	$	$	$
2	$	$	$	$
3	$	$	$	$
4	$	$	$	$
5	$	$	$	$
6	$	$	$	$
7	$	$	$	$
8	$	$	$	$
9	$	$	$	$
10	$	$	$	$

TOTALS: $ _____ $ _____ $ _____ $ _____

# of Pledge Cards _____

Instructions:

1. Be sure all pledge forms are complete, signed by the donor, and included in this envelope.
2. Fill in all information above and attach this form to the front of your envelope.
3. Seal the envelope and deliver to the locked drop box in the State Financial Services Division, Room 270 in the Mitchell Building.

----------Auditor's Check: Do not write in the space below----------

# of Pledge Cards	Payroll Deduction Total	Cash Total	Check Total	Envelope Total
	$	$	$	$

Reconciled by: _____ Date: _____