Utah State Employees' Charitable Fund

ONE-TIME (CASH) CONTRIBUTIONS ONLY PLEDGE SUMMARY

Coordinator's Name: **Tel.**

Department: **Date:** **Page of**

CONTRIBUTOR'S NAME	EMPLOYEE NO.	TOTAL CASH DONATION	CASH	CHECK #
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
		$	$	#
	SHEET TOTAL	$	$	
	PACKET TOTAL	$	$	

Deliver this summary sheet, cash, checks, and the Pledge and Payroll Deduction forms to the Division of Finance within three (3) days of receiving the funds.