

Campaign Coordinator Request for Supplies

Campaign Coordinator Name: _____

Organization: _____

Address: _____

Phone Number: Work: _____ Cell: _____

E-Mail Address: _____

Number of Employees: _____

Number of Pledge Forms: _____

Envelopes: (1 per 50 employees)

Payroll	_____	Special Events	_____
Credit Card	_____	Miscellaneous	_____
Cash	_____		
Corporate	_____		

Corporate Pledge Form: _____

Campaign Poster w/workplace QR Code _____

Tracking Thermometer: _____

Swag:

Balloons	_____	First-Aid Kits	_____
Pens	_____	Lip Balm	_____
Pencils	_____	T-Shirt(s)	_____
Cold/Hot Packs	_____	Candy w/epledge PURL	_____

Please return via email scan to Christine Pierce
cpierce@nazunitedway.org