



2015 Coordinator Training Instructions

Overview

Campaign Chair: Bevan Baker; Health Commissioner
bbaker@milwaukee.gov; 414-286-3521

Campaign Co-Chair: Paula Kiley; Library Director
pkiely@milwaukee.gov; 414-286-3020

Campaign Dates: Sept. 9 - 30

Campaign theme: CREATE CHANGE

Other Important Contacts:

Sarah DeROO; Health Communications Officer
sderoo@milwaukee.gov; 414-286-3548

Federation Contacts:

Community Health Charities of Wisconsin; focuses on health research and education
Jackie Ruggles; jruggles@healthcharities.org; 608-520-4182

Community Shares of Greater Milwaukee focuses on the environment, political advocacy and animal welfare
Nate Gray; nateg@communitysharesmke.org; 414-342-0883

EarthShare Wisconsin: focuses on local, national and international environmental issues
Darren Blankenship; darren@earthshare.org; 608-274-1173

Hunger Relief Fund of Wisconsin: focuses on food stability
Jonathan Hansen; jonathan@hungertaskforce.org; 414-777-0483

United Way of Greater Milwaukee and Waukesha County: focuses on local education, income and health issues
Kathy Miller; kmiller@unitedwaygmwc.org; 414-263-8150

City of Milwaukee Employees' 2015 Combined Giving Campaign

Name (Please Print)	Org LOC	Employee ID Number
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1 * *signature*

Contributor's Signature - must sign to authorize deductions _____ Date _____

Home Address _____ Work Phone # _____ Home Phone # _____

City _____ State _____ Zip Code _____ Email (Optional) _____

2 Pledge Payment

Payroll Deduction Please sign above to authorize deductions.
 I pledge \$ _____ x 26 pay periods \$ _____

Check (payable to the United Way-Fiscal Agent) \$ _____

Total Pledge \$ _____

3 Name Release/Acknowledgement

To receive an acknowledgement this **box must be checked** authorizing release of your name and address to designated agencies.

4 Please indicate where you wish to designate your gift.
 You may direct your entire gift to one federation, select a specific agency, or give to all federations.

A **Designate to the following federations:**

COMMUNITY HEALTH CHARITIES <small>Give. Connect. Help.™</small>	Community Health Charities of Wisconsin (#100) \$ _____
COMMUNITY SHARES OF GREATER MILWAUKEE	Community Shares of Greater Milwaukee (#200) \$ _____
EarthShare	EarthShare (#900) \$ _____
HUNGER RELIEF FUND OF WISCONSIN	Hunger Relief Fund of Wisconsin (Administrated by Hunger Task Force, Inc) (#500) \$ _____
LIVE UNITED United Way Greater Milwaukee & Waukesha County	United Way of Greater Milwaukee (#300) and Waukesha County \$ _____

B **Distribute to: Community Health Charities of Wisconsin, Community Shares of Greater Milwaukee, EarthShare, Hunger Relief Fund of Wisconsin, and United Way of Greater Milwaukee and Waukesha County:** \$ _____
If you choose this option your gift will be considered undesignated and shared by the five federations. Undesignated funds are distributed according to the percentage of designated funds received by the five federations.

C **Designate to the following agencies:** *If more than three agencies are designated please attach another pledge form.*

Agency# _____	Amount \$ _____
Agency# _____	Amount \$ _____
Agency# _____	Amount \$ _____

D **Distribute to the following 501(c)(3) Health and Human Service Agency:** _____

Designated Agency Name (Please print) _____

Agency Address _____

City _____ State _____ Zip _____

Thank You!

\$ _____
 Your TOTAL DESIGNATIONS amount in this box must equal your TOTAL PLEDGE amount in section 2

No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. Pledges paid through payroll deduction also require a copy of your pay stub, W-2 or other employer document showing amount withheld. Consult your tax advisor for more information.

ONLINE OPTION: <http://mintmilwaukee.gov>

Add Designations A, B, C and D (must equal total pledge in part 2).....

Report Envelopes (red & white big envelopes)

At the end of the campaign, you submit your Report Envelope. All envelopes are due Friday, October 2.

Important tips:

#1 section: Make sure your department name is on the envelope. Most will have a sticker on it, but if not, please write your department name and address.

#2 section: Leave blank

#3 section: Check "yes" if you have all pledges. Check "no" if you think more are coming.

#4 section: Fill in if you know. Leave blank if you don't.

#5 section: **IMPORTANT**; be accurate and double count your forms to make sure you have the correct numbers. **NO ONLINE DONATIONS ARE INCLUDED IN THIS SECTION.**

#6 section: Print your name and sign as well as date, add your phone number and email address.

Hand in Envelope(s) to:

**City of Milwaukee Health Dept
Attn: Giving Campaign
Zeidler Municipal Building
841 N. Broadway, 3rd Floor**

DO NOT SEND THROUGH INTER-OFFICE MAIL.

If you want to turn in before October 2, that's great. Only keep money and pledge forms in a secure place (locked drawer, safe, etc.)

Envelope# _____ of _____

Employees' Combined Giving Campaign Report Envelope

for UWGM use only

FISCAL AGENT:

Andar # _____

for UWGM use only

City 816033 County 816330 MPS 816082

United Way of Greater Milwaukee
225 West Vine Street
Milwaukee, WI 53212-0971
P 414.263.8100
www.unitedwaymilwaukee.org

ENVELOPE TYPE

for UWGM use only

Other 837591 SECC 816066 MATC 816132

A W

PLEASE COMPLETE ITEMS 1 THRU 6

for UWGM use only

Acct #: _____

2 Please enter payroll statement address (if different than #1)

1 Name and Address

YOUR DEPARTMENT NAME
ADDRESS

Contact Person _____

Address _____

City, State _____

Zip+4 _____

3 Is this your FINAL Campaign Report? Yes No **4** Total employees (not FTEs) at organization _____

5 Contributions Enclosed **DO NOT** include previously reported pledges.

Type of Contribution	Number of Donors	Total Amount Pledged	Payment Enclosed
A. Cash and Checks			
B. Payroll Deductions			
C. Special Event			
D. GRAND TOTAL (Add lines A thru C)			

DO NOT INCLUDE ONLINE PLEDGES

6 * your name
Report Prepared by (PLEASE PRINT)

* your signature
Signature

* your phone #
Telephone No.

* date
Date

Picked up by (please print)

Date

PLEASE RETURN ALL WHITE COPIES OF PLEDGE CARDS AND CASH OR CHECKS IN ENVELOPE.
THANK YOU!

for UWGM use only

COMPTROLLER'S PAYROLL SPREADSHEET

aka Turnaround Document or Excel Spreadsheet

All coordinators will receive the spreadsheet and need to complete with the PAYROLL pledges only.

New employees should be added to the listing in their assigned location with all necessary information provided.

Return the spreadsheet to Peter Mensah-Brown (Comptroller's office) via pmensa@milwaukee.gov by Friday, October 2nd. Any questions, call Peter at x2259.

Please do not send envelopes through interoffice mail. You must drop off payroll pledges to the Comptroller's office, City Hall, Room 404.

Method of Giving	Copy	Disposition
Payroll Deduction	White Copy (put in report envelope – red & white big envelope)	Drop off at: City of Milwaukee Health Dept Attn: Giving Campaign Zeidler Municipal Building 841 N. Broadway, 3rd Floor
	Yellow Copy	Arrange alphabetically within department location. Drop off at: Comptroller's Office City Hall, Room 404
	Pink Copy	Employee Copy
Checks	Attach to pledge form (put in report envelope)	Drop off at: City of Milwaukee Health Dept Attn: Giving Campaign Zeidler Municipal Building 841 N. Broadway, 3rd Floor
No Pledge	White Copy	Shred or dispose
Cash for special events	Put in report envelope and record on "Special Events" line	Drop off at: City of Milwaukee Health Dept Attn: Giving Campaign Zeidler Municipal Building 841 N. Broadway, 3rd Floor

Any questions, contact Shari Kraft x2306 or Kathy Miller (414) 263-8150

Campaign Background

City of Milwaukee runs an annual giving campaign that has a long history of creating change in our community while having fun with its historic special events.

This year's campaign theme is CREATE CHANGE championed by the Health Dept.

The charities represented by this campaign include 5 different umbrella groups:

- Community Health Charities of Wisconsin
- Community Shares of Greater Milwaukee
- EarthShare Wisconsin
- Hunger Relief Fund of Wisconsin
- United Way of Greater Milwaukee and Waukesha County

Coordinator's Role

Plan
Lead
Network
Motivate
Promote
Ask

Skills Needed

Organization
Implementation
Creativity
Knowledgeable
Confidence
Persuasive

2014 Results

TOTAL RAISED
\$270,224

1
out of
7



**AVERAGE
PLEDGE**
\$556



**COORDINATORS
MAKE IT
HAPPEN**

INFORMATION

- Logistics
- Charity knowledge
- Know your audience

COMMUNICATION

- Email
- Meetings/in person
- Year-round

PROMOTION

- Posters
- Post-it notes
- Website
- Online Giving

PARTICIPATION

- Personally ask every co-worker
- Leadership support
- One more donor

CONNECTION

- Charity Speakers
- Testimonials
- Volunteerism

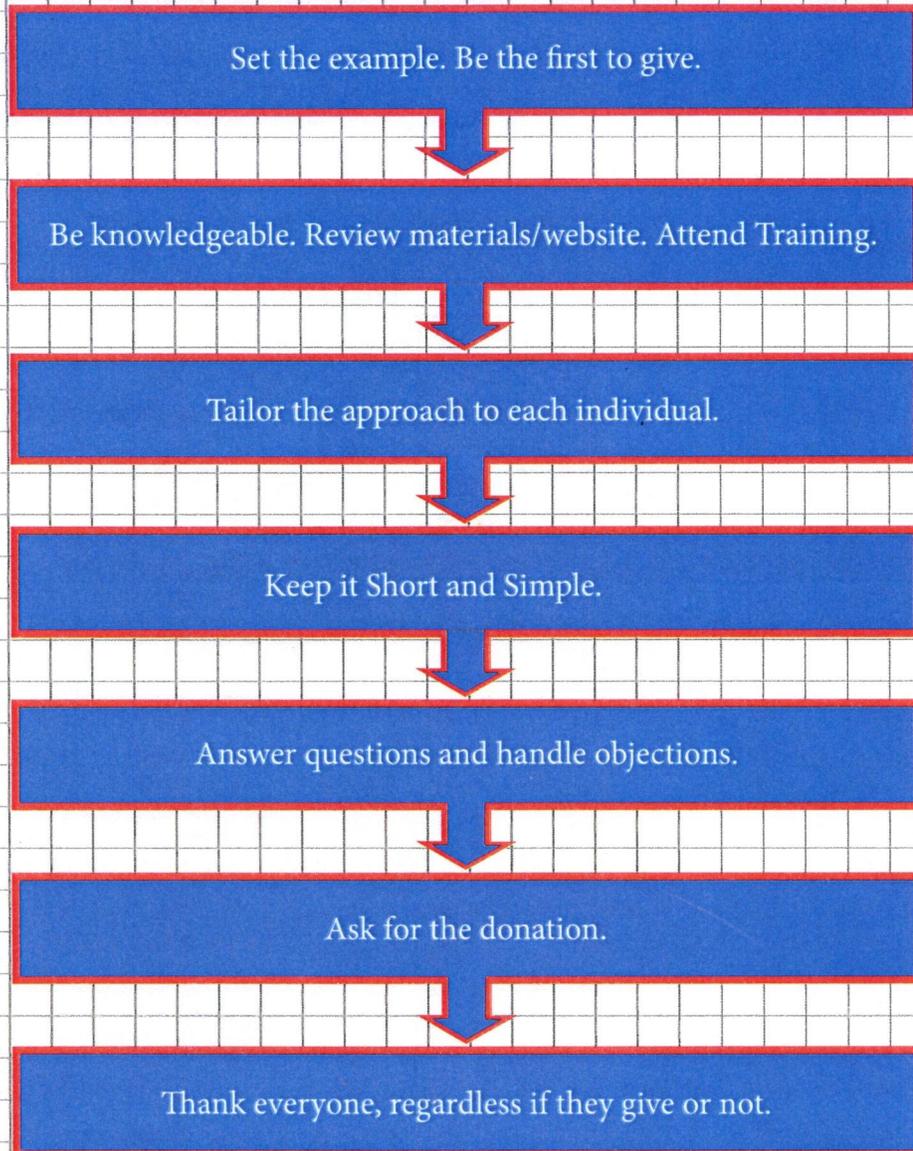
CELEBRATION

- Kickoff
- Special Events
- Thank you

Ask, and ask again!



The #1 reason people don't give.....They weren't asked.
Remember, you are not asking for yourself, you are asking for someone less fortunate.

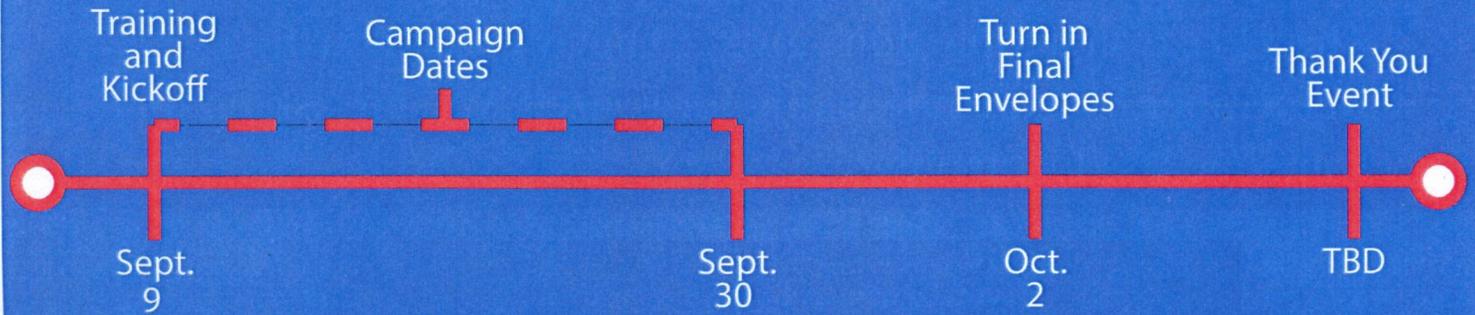


Handling Objectives

- Listen carefully
- Don't take it personally
- Don't argue
- Ask questions to clarify or find out more
- Don't make it a political issue
- Take your time, breathe and be yourself.

***If unsure, call a board member or Kathy Miller (414)263-8150**

Important Dates



2015 CAMPAIGN SCORECARD

Points	Total	Challenges
15		#1 Attend Training & Kick Off
10		#2 Publicize the campaign within your Dept. and promote city-wide special events
20		#3 Ask all your co-workers
10		#4 Promote online giving
\$1=1pt		#5 Increase Dept. total by \$1
1 donor=1pt		#6 Increase participation by 1 donor
10		#7 Thank everyone and share results
Total Points:		

Name: _____ Phone: _____

Dept: _____ Email: _____

HOW IT WORKS

- Complete each challenge and score yourself (honor system!)
- Return the completed sheet after your campaign is complete, no later than October 2.
- Scan and email to Kathy Miller, kmiller@unitedwaygmwc.org or fax to 414-263-8150

Prizes for top scorers!
Thank You and Good Luck

<http://mintmilwaukee.gov>