



# Tennessee Employees Charitable Campaign AGENCY REPORT FORM

This Report is: FINAL **or** SUPPLEMENTAL TO FINAL

Date Submitted: \_\_\_\_\_ County: \_\_\_\_\_

Department Name: \_\_\_\_\_ Allotment Code: \_\_\_\_\_

Local Office Coordinator Name: \_\_\_\_\_

Address of Local Office: \_\_\_\_\_  
Street Address City Zip Code

Phone # of Local Office: \_\_\_\_\_ Fax #: \_\_\_\_\_

Local Office e-mail address: \_\_\_\_\_

**Total # of Donors = \_\_\_\_\_ (A)**

**Total Amount Pledged = \$ \_\_\_\_\_ (B)**

**Total Number of Employees Solicited = \_\_\_\_\_ (C)**  
*(Contributing or not)*

*Please calculate the following:*

**Average Gift (B divided by A) = \$ \_\_\_\_\_**

**Per Capita Gift (B divided by C) = \$ \_\_\_\_\_**

**Percent Participation (A divided by C) = \_\_\_\_\_ %**

**Report Form: Make 2 copies of this Report Form** - submit one copy to your agency's statewide coordinator and keep one copy for your records.

**Pledge Forms:** - employee keeps the green copy; submit all others to your agency's statewide coordinator.

**Agency Statewide Coordinator:** Complete and submit your agency's combined final totals on the Report Form to the:

**Department of Human Resources  
Herman Smith, TECC Administrator  
First Floor, James K. Polk Building  
505 Deaderick Street  
Nashville, TN 37243**