State of Ohio Combined Charitable Campaign • Special Events



DIRECTIONS: Please fill out and use the Special Events Report for each campaign activity	that raises checks and cash dollars for the campaign. This report is in
addition to individual pledge forms and is only to be used for events such as Auctions, B	ake Sales, Dress Down Days, etc.
Please fill in the spaces using a black ink pen only.	
State Agency:	
Nork Location: (County – 1st four letters)	
If contribution made on behalf of/by Union please identify below:	
Union:	
Special Event Contribution	
DIRECTIONS: Please fill in the spaces completely with Charity Code(s) found in the Resou	rce Guide or website.
	Check No.:
O Attached is the check totaling \$, to be distributed per the designations listed below.	Check Date: M M / D D / Y Y Y
O Check here if bank deposit made. (One deposit slip per campaign envelope)	Deposit Amount: \$
Deposit receipt must be included with this form.	Deposit Date: ${M} = {M} = {M$
5-Digit Charity Code Designation Amount Charit	zy Name
1 \$,	
2 \$,	
3 \$,	
TOTAL PLEDGE: \$,	
Special Event funds can be designated to specific charities by placing the Charit listed, all Special Event monies will go into the undesignated fund to be shared pro	
pecial Event Name	was held on date:

Any designated fundraising from CCC Special Events should be publicly known by employees.

PLEASE RETURN ALL PLEDGE FORMS TO DEPARTMENTAL CAMPAIGN COORDINATORS.