



TENNESSEE EMPLOYEES CHARITABLE CAMPAIGN 2016 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 Processing

Make 2 copies - submit one copy to your agency's statewide coordinator and keep one copy for your records. Complete and submit/email your agency's combined final totals by **December 16, 2016** to the:

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