

# PLEDGE FORM



## STEP 1: MY INFORMATION

Name: \_\_\_\_\_  
 Dept: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Employee ID#:

## STEP 2: HOW OFTEN DO YOU WANT TO DONATE? (Fill in only one circle)

- Every Paycheck (bi-weekly)**  
(Complete steps 3A and 4)
- One-Time or Once Per Year**  
(Complete steps 3B and 4)
- I choose not to participate**  
(Complete step 4)

## DIRECTIONS

- Complete steps 1-4
- Fill in boxes and circles with a dark pen
- Write numbers clearly in boxes as shown below:

0	1	2	3	4	5
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- Shade the circles like this:
- Do not write: X - / or ✓ in boxes

**LEAVE UNUSED BOXES BLANK**

## STEP 3A: BI-WEEKLY PAYROLL DEDUCTION

### PLEDGE DURATION:

- Bi-Weekly for 1 Year

### FUND DESIGNATIONS:

Please indicate how you would like to allocate your bi-weekly donation. Write in the fund # and amount you would like to donate each paycheck and total per paycheck.

Fund #	Donation Amount Per Pay
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<b>Total Per Pay:</b>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

### SAMPLE PLEDGE AMOUNTS:

\$5/pay = \$130/yr      \$20/pay = \$520/yr  
 \$40/pay = \$1,040/yr      \$73.66/pay = \$1,915/yr

## STEP 3B: ONE-TIME DONATION

### PAYMENT METHOD and DURATION:

- One-Time Check - (You will receive a pledge reminder in January 2019)
- One-Time Payroll Deduction (Will be taken from 1st paycheck in 2019)

### FUND DESIGNATIONS:

Please indicate how you would like to allocate your annual or one-time donation. Write in the fund # and amount you would like to donate per year and total donation per year.

Fund #	Annual Donation Amount
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
<b>Total Per Year:</b>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

## STEP 4: AUTHORIZATION

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### AMBASSADOR USE ONLY

- Leave of absence
- Changed Dept.
- Retired/Terminated