

# Employee Giving Pledge Form and Payroll Deduction Authorization

I, (Name) \_\_\_\_\_ would like to make the following contribution(s) to the Fort Thomas Education Foundation, Inc:

Contribution options (select one):

- \$ \_\_\_\_\_ from each of my paychecks (*next paycheck through 06/30/2016 paycheck*)
- \$ \_\_\_\_\_ from each of my next \_\_\_\_\_ checks (\$ \_\_\_\_\_ total).
- \$ \_\_\_\_\_ one time deduction (through payroll).
- \$ \_\_\_\_\_ monthly contribution to credit card\*
- \$ \_\_\_\_\_ one time gift (check attached).
- \$ \_\_\_\_\_ one time gift (credit card\*). Type: MasterCard Visa Discover

Card number \_\_\_\_\_ Expiration date: \_\_\_\_\_

\*You can also call the office with sensitive credit card information or donate directly online at [FTEF.org](http://FTEF.org) ([Donate Now](#) button, choose [Annual Appeal](#), add special note: [employee giving](#))

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

The Fort Thomas Education Foundation is a 501(c)(3) organization registered with the Internal Revenue Service. You will receive a gift statement from the Foundation for income tax purposes at the end of the calendar year.

Please return this form to your school office or the Central Office Attn: Sally Race.  
Thank you for supporting the Fort Thomas Education Foundation!  
Questions? Contact Sally Race 859-815-2004 or [ftef@fortthomas.kyschools.us](mailto:ftef@fortthomas.kyschools.us)



FROM YOU. FOR THEM!

RAISE FORGE CELLEBRATE