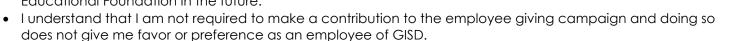


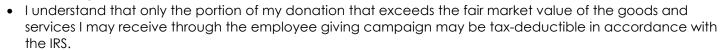
2023-24 Employee Giving Campaign Pledge Form

Employee Information								
Employee Name Last 4 Digits of Employee SSN:								
Contribution								
I would like to make a monthly contribution to the GISD Educational Foundation through payroll deduction.								
	\$5/ month	_	\$10/ month		\$20/ month			
	\$30/ month	_	\$40/ month		\$50/ month			
		Other; I woul	d like to make a m	nonthly contribution	on of/ month.			
I would like to opt out from receiving any promotional incentives in order to maximize my donation. If you selected \$10 or more per month, please mark your t-shirt size:								
Small	Medium	Large	X-Large	XX-Large	XXX-Large	Other		
I would like to make a one-time contribution of \$ to the GISD Educational Foundation through payroll deduction.								
I would like to make a one-time contribution of \$ to the GISD Educational Foundation by check. *No cash please.*								
One time donations may also be made via credit card at www.GalvestonEdFoundation.org.								
Designation								
Please select or	ne							
Please designate my gift for the Grants to Teachers & Schools program. Please use my gift where it is needed most.								
If a selection is not made your gift will be designated as unrestricted.								

Acknowledgements

- I understand that if I select to make a monthly contribution, my contribution will continue to be deducted from my paycheck as long as I am employed by GISD until I ask for it to stop.
- I understand that I can ask for my monthly contribution to stop at any time by contacting terrymuehe@gisd.org and TheresaBurnett@gisd.org
- I understand that I can change the amount I contribute monthly by submitting a new copy of this form to foundation@gisd.org.
- I understand that the first monthly deduction or my one-time deduction will begin during the October 2023 pay period.
- I understand that contributing to the employee giving campaign does not give favor or preference to any grant applications I may submit to the Galveston ISD Educational Foundation in the future.





• I understand that I should retain a copy of this document for my records, but I may request a copy of it at any time by contacting the GEF office. A copy of this pledge card along with a pay stub may be needed for IRS purposes.

Signature:	Date:	
_		

Please return this form by **September 21, 2023** to terrymuehe@gisd.org.

