## DONO

## **2023 TENNESSEE BOARD OF REGENTS EMPLOYEES CHARITABLE CAMPAIGN**

PLEDGE FORM – Easy as 1, 2, 3...

- 1. Provide us with information about you, the donor
- 2. Select one or more recipient charities and your gift amount
- 3. Authorize your deduction

## **STEP #1 DONOR INFORMATION**

Name		ID#/Social Security #(Used for payroll purposes only)	
Institution Name		(Osed for payron purpos	ses only)
Department		Phone Number (	)
Please acknowledge my gift.			
Retiring this year? Please check communications from your favor email, below.			
Your favorite charity(ies) would like to the home address and/or email. If you choose anonymous.			
Street			
City		State Zip Co	ode
Home Email Address			
STEP #2 CHARITY AND GIFT DES	SIGNATION		
Please designate organization(s) and pays	rall deduction amo	ount(s) below to 1 or mor	a charitabla
organizations.	on deduction and	(Jan-Dec 2024)	(Jan 2024)
Organization Name	6-digit code	\$ Amount per pay period	\$OR One Time Gift
Organization Name	6-digit code	\$Amount per pay period	\$OR One Time Gift
		\$	\$
Organization Name	6-digit code	Amount per pay period	OR One Time Gift
Total per pay period = $\S 0.00$ X p	ay periods = \$	Annual Gift	
STEP #3 AUTHORIZE YOUR DEDUCTION			
I authorize my payroll deduction as indic	ated on this pledg	e form (signature requir	ed below).
Authorized Signature		Date	
	Thank You!		