

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

## **2024 GIFT COMMITMENT** EMPLOYEE ANNUAL GIVING

| DONOR SECTION  |  |  |      |
|--|--|--|------|
| Name (as it appears in Paycom)   |  | Anonymous? O Yes   | O No |
| Address  | City   | State Zip Code   |      |
| Phone #  | Email  |  |      |
| Total Gift Amount \$   | Center/Program Designatio                        | on   |      |
|  |  | ease provide the breakout of your gift (ex. \$1,<br>ours to the Hope Fund, please also indicate he |      |
| <ul> <li>Donor wants to pay in reg</li> <li>Gift amount per pay</li> </ul> | gular installments via <b>PAYROLL DEI</b>        | DUCTION (26 pay periods).  |      |
| l understand that the p<br>with the YMCA of Middl                          | ayroll deduction I have selected will cont       | pped at any time by notifying the Payroll  |      |
| old O Donor wants to pay in a s  | single installment via <b>PAYROLL DED</b>        | DUCTION (One-Time Gift).   |      |
| old O Donor wants to pay singl   | e installment via CASH/CHECK enc                 | losed.   |      |
| O Donor would like to make   | e a pledge or single installment via <b>O</b>    | ONLINE EXPRESS by 12/31/24.  |      |
| We will begin sending  | g reminders to you in Q1 of 2024                 |  |      |
| Provide an email if year   | ou would like to receive additional s            | teps from the Philanthropy Office o  | n    |
| how to proceed with  | giving via online express                        |  |      |
| TO GIVE ONLINE   | E, VISIT <b>YMCAMIDTN.(</b>                      |  |      |
| Donor Signature  |  | Date   |      |
| *For gifts to be deducted for all 26 pay perio                             | ds, pledge cards must be to the HRC's and scanne | ed into DocuPhase by close of business 12/15/202   | 3.*  |
| Constituent ID   | Fundraiser/Solici                                | itor   |      |
| Donor Employee ID  | Employee De                                      | epartment  |      |
|  |  |  |      |

## YMCA OF MIDDLE TENNESSE TAX ID: 62-0476243

Our Mission: A worldwide charitable fellowship united by a common loyalty to Jesus Christ for the purpose of helping people grow in spirit, mind and body.