NCB Employee Giving
Pledge Form

Give online at: https://ncb.americascharities.stratuslive.com

☐ Check this box for additional pledge form page only.

FIRST NAME

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

MIDDLE INITIAL

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LAST NAME

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CONTACT INFORMATION

Unique EMPLOYEE ID / INVITE CODE

☐☐☐☐☐☐☐☐☐

PHONE NUMBER *(For use to verify designation)*

☐☐☐ - ☐☐☐ - ☐☐☐☐

EMAIL

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

HOME ADDRESS *(Optional) Required for acknowledgements if no email*

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CITY   **STATE**   **ZIP**

Do you authorize your address and gift amount to be released to the designated charities so that you will receive an acknowledgement?   ☐ Yes   ☐ No

DESIGNATING YOUR GIFT   *To designate more than 4 charities, please use a second form and check the box in the top right corner of the additional pag*

WRITE-IN A CHARITY: To support a charity not listed in the campaign, check the "This is a write-in" box. We will not be able to process "Write-in" pledges unless all nonprofit information is provided. Nonprofit address and tax ID information can be found at www.guidestar.org or on the nonprofit's website.

NONPROFIT EIN/TAX ID	NONPROFIT NAME	GIFT AMOUNT	PAYMENT TYPE
☐☐☐☐☐☐☐☐☐		$ ☐☐☐☐☐.☐☐	☐ One-time Payroll Deduction / ☐ Recurring Payroll Deduction
☐ This is a write-in ADDRESS ____ CITY ____ STATE ____ ZIP CODE ____			☐ Check
☐☐☐☐☐☐☐☐☐		$ ☐☐☐☐☐.☐☐	☐ One-time Payroll Deduction / ☐ Recurring Payroll Deduction
☐ This is a write-in ADDRESS ____ CITY ____ STATE ____ ZIP CODE ____			☐ Check
☐☐☐☐☐☐☐☐☐		$ ☐☐☐☐☐.☐☐	☐ One-time Payroll Deduction / ☐ Recurring Payroll Deduction
☐ This is a write-in ADDRESS ____ CITY ____ STATE ____ ZIP CODE ____			☐ Check
☐☐☐☐☐☐☐☐☐		$ ☐☐☐☐☐.☐☐	☐ One-time Payroll Deduction / ☐ Recurring Payroll Deduction
☐ This is a write-in ADDRESS ____ CITY ____ STATE ____ ZIP CODE ____			☐ Check

Make checks payable to "America's Charities - Fiscal Agent" All check donations will be cashed in the current year. PLEASE RETURN THIS FORM, ALONG WITH ANY CHECK DONATIONS TO YOUR CAMPAIGN COORDINATOR. See the FAQs at https://ncb.americascharities.stratuslive.com for mailing address.

Total Sum of All Check Donations: $ ☐☐☐☐☐.☐☐

All payroll deduction pledges designated above will begin with the first pay period of the next calendar year. (Deduction period Jan.-Dec. 2025)

Total Sum of All Payroll Deduction Pledged: $ ☐☐☐☐☐.☐☐

AUTHORIZATION   *(Sign and date here to authorize pledge and payment method.)*

Sign: _____

Date: ☐☐ / ☐☐ / ☐☐☐☐