

1 EMPLOYEE INFORMATION

Last Name	First	Middle
Department	Division	Program
Mail Stop/ Work Location	Employee ID (Refer to Paystub)	Ambassador

2 MY DONATION: 3 WAYS TO GIVE

1. Check ('15 Tax Event) Direct Donation of \$ _____ Attach check(s) to form. Make directly payable to nonprofit(s) & note 4 digit code in memo line of check

2. Payroll Donation ('16 Tax Event) (Choose one option)

- Option A - Twice a month \$ _____ X 24 = \$ _____ Total Annual Donation
- Option B - Once a month \$ _____ X 12 = \$ _____ Total Annual Donation
- Option C - One-time donation \$ _____

Please distribute my Payroll donation as follows:

Code	Organization/Federation name	Annual Amount	Dedication - (optional)
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	\$ _____	<input type="checkbox"/> <input type="checkbox"/> _____
TOTAL \$ _____			In Honor of In Memory of
		= Total Annual Donation above	

3. Time Donation ('15 tax event) of compensatory or vacation hours
Please donate the net cash value of _____ Hours of Vacation Time
+ _____ Hours of Compensatory Time
= _____ TOTAL hours (40 hours total maximum, unless you have use it or lose it leave.)

Please distribute my Time donation as follows:

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	Hours _____	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	Hours _____	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	Hours _____	<input type="checkbox"/> <input type="checkbox"/>

3 DONATION ACKNOWLEDGEMENT

I am a leadership giver at the following level

- I accept my leadership gift
- I decline my leadership gift

Check One	
<input type="checkbox"/> Bronze	1 hour per month
<input type="checkbox"/> Silver	2 hours per month
<input type="checkbox"/> Gold	3 hours per month
<input type="checkbox"/> Platinum	4 hours per month

Hour = \$ Value of Hourly Rate of Pay Payroll, Time, Direct Check or any combination of the three. See instructions for easy calculation.

PRIVACY OPTIONS (Payroll and Time Donations Only)*

Name and Address

- Please **share** my name and address with the organization(s) I designated above.
- Do not share my name and address; I would like to remain **anonymous**.

4 SIGNATURE

I confirm that all the information I have entered is correct to the best of my knowledge and if I opted for a time donation I hereby authorize King County to deduct the amount shown above from my hours during December 2015 and if I opted for payroll deduction I hereby authorize King County to deduct the amount shown above from my pay during 2016 starting with the first pay period in January. I understand this authorization may be discontinued by me in writing at any time before it expires. *The organizations and federations participating in the King County Employee Giving Program do not provide goods or services in whole or partial consideration for any donations received via this form.*

Signature _____

date _____

Turn Form in to your worksite Ambassador or send interoffice to MS: CNK-ES-0231, or by mail to KCEGP 401 Fifth Ave, Second Floor, Seattle, WA 98104

This Section for EGP only ETR:

TY:

RCN:

LG:

NOTES:

Paper Pledge Form Instructions

1

- Clearly print your name.
- Fill in all information
- Don't know your employee ID? You can find it on your pay stub or in PeopleSoft.

2

- Check the types of donation you would like to make: check, payroll, or time. Or ALL three!
- For **payroll donation**, select only *one* frequency (A, B OR C)
- Print the agency 4 digit code and name. See Example.
- Enter the total donation for the year. Should equal the amount above.
- For **time donation**, write the number of hours you would like to donate in whole hour increments.
- To make any of your donations *in honor of* someone living, or *in memory of* someone deceased, print their name on the dedication line.

3

- **Leadership Giving:** ([Online pledging](#) does this automatically for you) Divide your total annual donation (check and payroll combined) by your hourly rate of pay. This result plus any hours of time donated determine your leadership level: For example if you make \$20.00 an hour:

$$\frac{\$60 \text{ direct check} + \$120 \text{ payroll donation}}{\$20.00 \text{ (hourly rate of pay)}} = 9$$

9 (from above) + 4 hours of time = 13 (more than one hour per month) Bronze level!

- Accept or decline the gift (even if you decline the gift, please check the level for our records).
- **Privacy Option:** Check box to release your name and home address to your designated organizations or check the other box to remain anonymous.

4

- Sign and date the form. **MAKE A COPY FOR TAX PURPOSES.**
- Submit your donation form to the ambassador in your department or mail to the EGP : CNK-ES-0231

Remember to keep a copy of your pledge form for tax purposes. Go ONLINE for paper-free Pledging!

King County Employee Giving Program **PLEDGE FORM** Additional Form PLEASE PRINT

1 EMPLOYEE INFORMATION

Last Name _____ First _____ Middle _____
 Department _____ Division _____ Program _____
 Mail Stop/ Work Location _____ Employee ID (Refer to Paystub) _____ Ambassador _____

2 MY DONATION: 3 WAYS TO GIVE

1. Check (14 Tax Event) Direct Donation of \$ _____ Attach check(s) to form. Make directly digit code in memo line of check These two numbers should be equal.

2. Payroll Donation (15 Tax Event) (Choose one option)

Option A - Twice a month \$ _____ X 24 = \$ _____ Total Annual Deduction
 Option B - Once a month \$ _____ X 12 = \$ _____ Total Annual Deduction
 Option C - One-time deduction \$ _____

Please distribute my **Payroll** donation as follows:

Code	Organization/Federation name	Annual Amount	Dedication - (optional) Name
9 9 9 9	*KCEGP* EXAMPLE	\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
<input type="checkbox"/>		\$ _____	<input type="checkbox"/>
		TOTAL \$	<input type="checkbox"/>

= Total Annual Deduction above

3. Time Donation (14 tax event) of compensatory or vacation hours
 Please donate the net cash value of _____ Hours of Vacation Time
 + _____ Hours of Compensatory Time
 = _____ **TOTAL hours** (40 hours total maximum, unless you have use it or lose it leave)

Please distribute my **Time** donation as follows:

<input type="checkbox"/>	_____	Hours	<input type="checkbox"/>
<input type="checkbox"/>	_____	Hours	<input type="checkbox"/>
<input type="checkbox"/>	_____	Hours	<input type="checkbox"/>

3 DONATION ACKNOWLEDGEMENT

I am a leadership giver at the following level
 I accept my leadership gift
 I decline my leadership gift

Check One

Bronze 1 hour per month
 Silver 2 hours per month
 Gold 3 hours per month
 Platinum 4 hours per month

Hour = \$ Value of Hourly Rate of Pay
 Payroll, Time, Direct Check or any combination of the three.
 See instructions for easy calculation.

PRIVACY OPTIONS (Payroll and Time Donations Only)*
 Name and Address
 Please share my name and address with the organization(s) I designated above.
 Do not share my name and address; I would like to remain **anonymous**.

4 SIGNATURE

I confirm that all the information I have entered is correct to the best of my knowledge and if I opted for a time donation I hereby authorize King County to deduct the amount shown above from my hours during December 2014, and if I opted for payroll deduction I hereby authorize King County to deduct the amount shown above from my pay during 2015 starting with the first pay period in January. I understand this authorization may be discontinued by me in writing at any time before it expires. The organizations and federations participating in the King County Employee Giving Program do not provide goods or services in whole or partial consideration for any donations received via this form.

Signature _____ Date _____

Turn Form in to your worksite Ambassador or send interoffice to MS: CNK-ES-0231, or by mail to KCEGP 401 Fifth Ave, Second Floor, Seattle, WA 98104

This Section for EGP only: ETR _____ TY _____ RCN _____ LG _____ NOTES _____

PLEDGE ONLINE TODAY AT: WWW.KINGCOUNTY.GOV/GIVING *SEE REVERSE FOR "FINE PRINT", INSTRUCTIONS AND DETAILS

This is the agency code

SAMPLE ORGANIZATION LISTING

9999 KCEGP
 401 Fifth Ave, Second Floor, Seattle, WA 98104
www.kingcounty.gov/giving
 EXAMPLE

Contact Info: King County Employee Giving Program
 Junelle Kroontje, Employee Giving Program Administrator
 206.263.9405
 junelle.kroontje@kingcounty.gov
 CNK-ES-0231
 401 Fifth Avenue, Second Floor
 Seattle, WA 98104

If you have questions about workplace giving or need assistance in completing the donation form, please contact the ambassador in your department or the Employee Giving Program Administrator. Visit the Employee Giving Program website www.kingcounty.gov/giving for additional information, an online list of nonprofit agencies, dollars raised to date, and to learn how you can make a difference in our communities.



King County

Employee Giving Program

Paper Pledge Form Information

General

Each person's exact tax situation is unique; please consult with your tax advisor if you have questions. Please make a copy of your pledge form for tax purposes and your last pay stub of the year. Regardless of how you give, you are making a world of difference in our communities.

During the application process, all participating nonprofits have been vetted against standardized eligibility criteria. If you would like to see a nonprofit in the program please email their contact information to the EGP administrator and they will be notified for the following year's annual giving drive. No nonprofit in the program is allowed to funnel money to another nonprofit as a way to circumvent the eligibility process. Please no write-ins, including for direct checks. They will be returned for correction.

For all fundraising options, including special events, you may include your donation in a pool of money that will be distributed among all nonprofits that receive donations, write 9999 in the code section and list KCEGP.

Donations are fully tax deductible. Per King County Code, participating nonprofits are responsible for the costs of the program. In 2014, this was 11% of total dollars raised. Learn more here: www.kingcounty.gov/giving

Rules for Payroll Donations

- Minimum donation is \$5.00 per pay period indicated.
- May give up to 20 organizations.
- Payroll Donations are a 2016 Tax Event.

Rules for Time Donations

- Time donations cannot be accepted after November 20, 2015. This is a firm deadline.
- Minimum donation is 4 hours. Maximum donation is 40 hours, unless you have excess (use-it or lose-it) vacation time - then you may give the excess plus the original 40.
- You can make a donation of time up to three organizations.
- Time Donations are income and therefore they will be treated like such. It is the NET cash value after all mandatory withholdings that will be considered the donation. **Please note:** Time donations are usually taxed at a different rate than your usual paycheck. If you have any questions about this please contact the EGP for further clarification. You will receive a pay stub and a letter of receipt detailing the net cash value of the time donated.
- Time Donations are processed the 2nd week of December, therefore they are a 2015 Tax Event.

Rules for Direct Checks

- You may give to as many participating nonprofit organizations as you would like by writing checks directly to them. Write the check to the nonprofit organization and write the four digit code in the memo line.
- Checks are a 2015 tax event.
- Direct Checks can only be done on a paper form.
- You cannot remain anonymous with a check.
- Checks may not be sent in interoffice mail. Please have them hand delivered or mailed through USPS to the EGP.