



**Employee Pledge Form**  
*Please return to the Office of Development*  
**DUE BY SEPTEMBER 30, 2019**

**DONOR INFORMATION**

Name: \_\_\_\_\_

Employee # (if known): \_\_\_\_\_ Phone: \_\_\_\_\_

Home Parish: \_\_\_\_\_

Office Location (where you work): \_\_\_\_\_

T-Shirt Size (circle one):

S      M      L      XL      2XL      3XL      4XL

*Giving Method*

**Payroll Deduction**

\$\_\_\_\_\_ twice per month from November 30, 2019 – August 30, 2020 (10 payments) for a TOTAL of \$\_\_\_\_\_.

\$\_\_\_\_\_ one time gift

(One time gifts will be deducted from the Nov. 30th paycheck.)

**Credit Card**

\$\_\_\_\_\_ one time

\$\_\_\_\_\_ monthly

\$\_\_\_\_\_ quarterly (Nov, Feb, May, Aug)

Type of Card

\_Visa \_MC \_Amex \_Disc

Card #: \_\_\_\_\_

**Check**

Cash/Check

\$\_\_\_\_\_

Make checks payable to Diocese of Lexington

Mail to:  
Office of Development  
1310 W. Main St.  
Lexington, KY 40508

**Optional – Gift Tribute**

In memory of \_\_\_\_\_

In honor of \_\_\_\_\_