



**OPEN
YOUR
HEART**
TO THE HUNGRY
AND HOMELESS

I pledge a gift of \$ _____ to be paid in the form of:

Payroll deduction _____ x _____ = _____
Amount per pay period # Pay periods Total

One time payroll deduction

Cash or check donation (*Please make payable to Open Your Heart to the Hungry and Homeless.*)

One time credit card donation

Card # _____ Visa MC AMEX Disc

Exp Date _____ Security Code (3-4 digit number on your card) _____

Open Your Heart to the Hungry and Homeless does not process designations to specific agencies. By keeping funds undesignated, Open Your Heart can respond quickly to the agencies most in need throughout the year. This also enables us to keep our administrative costs low.

Please print clearly

Employee Name _____

Preferred Address _____

City _____ State _____ ZIP _____

Email Address _____

Would you like to receive an acknowledgement for your gift?

Yes, via mail Yes, via email No acknowledgement necessary

Signature _____ Date _____

Important tax information: Please retain a copy of this pledge form for your tax records. Open Your Heart makes the assurance that no goods or services were received in exchange for this contribution.