



2023-24 SEF Staff Pledge Form

Matching Campaign

Your\$ + Match\$ = Double the Impact

PAYROLL CONTRIBUTION

I authorize my employer to deduct the amount indicated below from each pay period (for 25 pay periods) beginning September 15, 2023. (Please return this form to Kaytee in the Payroll Office.)

\$8 <input type="checkbox"/>	\$12 <input type="checkbox"/>	\$16 <input type="checkbox"/>	\$20 <input type="checkbox"/>	Other \$ _____ <input type="checkbox"/>
Matching Funds makes it = \$16!	Matching Funds makes it= \$24!	Matching Funds Makes it= \$32!	Matching Funds Makes it= \$40!	Your\$+ Match\$ = Double Your Impact!

ONE-TIME CONTRIBUTION

I will make a one-time contribution for the 23-24 campaign. Please make checks payable to the Sparta Education Foundation.

\$ _____

Your\$ + Match\$ = Double Your Impact!

CREDIT CARD/ ACH CONTRIBUTION

I will make an online contribution for the 23-24 campaign. Please scan the QR code below.



PLEDGE AUTHORIZATION (Required)

Signature: _____

Printed Name: _____

Home Address: _____

School Building: _____ Email: _____

Contributions are tax-deductible. Please make checks payable to Sparta Education Foundation.

Questions? Contact sef@spartaschools.org or (616) 887-8253
 Send via interoffice mail to the "Administration Building"
 Or mail to: Sparta Education Foundation, 465 S Union St, Sparta MI 49345

