

## Go online at www.AlaskaSHARE.org

- · pledge online · get charity codes
- · contact campaign staff

NAME	OR INFORMATION  PHONE
DEPARTMENT	DIVISION
v	at-Su Other
Ğ	IVING OPTIONS
☐ PAYROLL DEDUCTION	,
	EMPLOYEE ID NUMBER
\$ X 24 = \$	
PER PAY PERIOD DEDUCTION TOTAL ANNUAL AMOUNT	
EMPLOYEE'S SIGNATURE	DATE
CHECK (Payable to SHARE campaign) \$	Check #
☐ CASH \$	
☐ CREDIT CARD	
	START DATE
	EVENDATION DATE
	EXPIRATION DATE
CI PLEASE SELECT HOW DONATION WILL BE DISTRIBUTED. CODES ARE	HARITY CODES
TEASE SELECT HOW DOING ION WILL BE DISTRIBUTED. CODES ARE.	AVAILABLE AT ALAGRAGITATIE. ONG.
	\$\$
Code # Amount Code #	Amount Code # Amount Code # Amount
Code # Amount Code #	Amount Code # Amount Code # Amount
AGENCY	ACKNOWLEDGMENT
YES, please provide my info to the agencies I have designated.	DO NOT release my info to the agencies I have designated.
NAME	ADDRESS
CITY STATE	
	GIFT OPTIONS
YES, please send me my qualifying gift.	☐ NO, I do not want a gift.