



# Leon County Schools Continuous Giver Change Form 2024-2025

As a participant in UWBB’s LCS Combined Charities Campaign, I, \_\_\_\_\_ (Full Name and Employee #)

wish to update my continuous giver pledge as follows:

Update my annual payroll deduction

• New Amount: \_\_\_\_\_ (per pay period) X 10 (number of pay periods) = \$ \_\_\_\_\_

• My Impact:

Option A: Allow volunteers to distribute funds to meet the most critical needs

Option B: Housing Early Learning Safety Net Health & Mental Health Skills Development

Counties: Franklin Gadsden Jefferson Leon Liberty Madison Taylor Wakulla

Option C: Combined Charities Campaign: \_\_\_\_\_

• Cancel my continuous payroll deduction Effective Date: \_\_\_\_\_

Employees must sign and date when making changes to their pledge.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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