



## 2020-21 PIE Membership Form Payroll Deduction Form

Craven County Partners In Education  
is a 501(c)3 corporation and donations  
are tax deductible to the fullest extent of the law.

Partners In Education works diligently throughout the year to strengthen the bond between the community, schools, and businesses in Craven County. To learn more about our grants and the due dates, or to apply for one of our grants, go to <https://cravenpartners.com/>.

**Note: PIE membership must be renewed each year, to stay on the payroll deduction & to be eligible for the extra point on grant rubrics, or check Sustaining Member Below & automatically be renewed!**

**The school with the highest number of participants in the Payroll Deduction Program will be awarded \$1,000!**  
(In case of a tie, the monies will be split.)

**Dr. Doyle's Superintendent Challenge:**  
**All Craven County Schools employees participating in the Payroll Deduction Program (including previous years' sustaining members) will be included in a drawing for \$500 in October!**  
**The money awarded is for your personal use!**

Please complete the following information and return this form to your PIE Ambassador or to Partners In Education at Central Services or by email to [Darlene.Brown@Cravenk12.org](mailto:Darlene.Brown@Cravenk12.org) **by October 15, 2020, 5:00 pm. Deductions will begin with your October 31st check.**

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

Designated School: \_\_\_\_\_

*The minimum contribution through payroll deduction is \$100/year.*

### **Monthly Deductions:**

1. I'm on the following pay cycle:  10-month Pay Period  11-month Pay Period  12-month Pay Period

2. I would like to contribute the following each month:

*If you are on a 10-month pay period, the minimum is \$10/month; 12 month pay period, the minimum is \$8.33/month.*

\$8.33  \$10  \$15  \$25  Other \$ \_\_\_\_\_ (fill in amount) Total Annual Gift \$: \_\_\_\_\_

3.  **Sustaining Member Monthly Payment:** Your gift will automatically be deducted each month AND will automatically be renewed annually until you tell us to stop

4. Last 4 digits of SS #: \_\_\_\_\_

### **Annual Deduction:**

1.  I would like an **Annual/One-time Deduction** from my account (minimum \$100) \$ \_\_\_\_\_

2.  **Sustaining Member Annual/One-Time Payment:** Your gift will automatically be deducted once each year in October AND will automatically be renewed annually until you tell us to stop

3. Last 4 digits of SS #: \_\_\_\_\_

>>> Signature: \_\_\_\_\_

*Thank you for supporting the organization that supports our educators!*

**Note:** All members of Partners In Education will receive **one extra point** on their total grant score for the PIE Grant, International Paper Math & Science Grant, and the Twin Rivers Artists' Assn. Grant.