



## WHO WE ARE

Domino's Pizza Partners Foundation is a non-profit organization supported by Domino's Pizza and its team members. It was established in 1986, with the intent of helping team members in times of hardship and adversity. Many of these incidents include on-the-job accidents, fire or natural disaster occurrences, medical emergencies or death of an immediate family member. Today, thousands of team members throughout the world have received financial assistance.

## HOW WE HELP

Team members in need of assistance can contact the Partners office to discuss the details of their situation. Review, research and decisions are made by the Partners staff, with the assistance of a Board of Trustees. If assistance is granted, financial help can be made available immediately. All cases are processed with strict confidentiality.

## GET INVOLVED

Payroll deductions are a significant source of funding for the organization; comprising more than 70-percent of Partners' annual revenue. Through payroll deduction, everyone has an opportunity to contribute at a level that is appropriate for him/her. If you have questions about the Foundation, contact a case manager at 734.930.3297.

# Payroll Deduction Enrollment Form

- Yes, I would like to participate. Please deduct from each of my paychecks:  \$1  \$2  \$5  \$10  \$20  \$25  Other: \$ \_\_\_\_\_
- I am currently participating and would like to upgrade my deduction to:  \$2  \$5  \$10  \$15  \$20  \$25  Other: \$ \_\_\_\_\_
- I am currently participating and would like to maintain my current deduction.
- I would like to contribute a one-time deduction from my paycheck of: \$ \_\_\_\_\_  No, I cannot give at this time.

**Please return completed form to:**

Domino's Pizza  
Partners Foundation  
30 Frank Lloyd Wright Dr.  
P.O. Box 997  
Ann Arbor, MI 48106

Telephone: 734.930.3296  
Fax: 800.253.8182  
Email: Dana.Stearns@dominos.com

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

Date: \_\_\_\_\_

Employee ID: \_\_\_\_\_

Corporate Store #: \_\_\_\_\_

Corporate Office: \_\_\_\_\_  
Department

Distribution Center: \_\_\_\_\_  
Site

Work Address: \_\_\_\_\_  
Address City State ZIP

Position: \_\_\_\_\_