

FACULTY & STAFF CAMPAIGN PAYROLL DEDUCTION

GIVING THROUGH EMPLOYEE PAYROLL DEDUCTION

Please print and complete each section of the form and forward to Institutional Advancement, Box K, 2nd floor Socquet House. Questions? Call Bridget at ext. 3342 or email blrogala@annamaria.edu

PERSONAL INFORMATION (PLEASE	E PRINT)	
Employee Name		
Title/Department		
Campus Address	Campus Phone	AMC Class Year
Home Address	Home Phone	
City State	Zip Email	
PLEDGE INFORMATION Option 1: Open-Ended Pledge Indicates that you choose to have a specific amount deducted from your paycheck until you notify IA otherwise. Amount per Paycheck: \$	☐ Option 2: Fixed Pledge Indicates that you choose to have a specific amount deducted from your paycheck for a set period of time. (ex. One Year) Total Pledge: \$ Amt Per Paycheck: \$ Start Date: End Date:	□ Option 3: One-Time Gift Indicates that you choose to have a specific amount deducted once from your paycheck. Amount: \$ Paycheck Date: Also, if you prefer * Credit card gifts can be processed at www.annamaria.edu/give *Personal checks can be sent to IA at Box K, 2 nd floor Socquet House
PAYROLL DEDUCTION AUTHORIZATION I authorize Anna Maria College to make deductions from my paycheck as indicated on this gift form. I understand that this deduction will continue in effect until termination of my employment with the College (unless designated otherwise, in Option 2 or 3, above) or until I submit written notice of change or cancellation with Institutional Advancement.		

Signature: _____ Date: _____