

Payroll Deduction Form

Keene State College, 229 Main Street, Keene, NH 03435-2701

Yes, I wish to support **Keene State College!** Please direct my tax-deductible gift toward:

The KSC Fund (Unrestricted)

Operating Staff Dependent Scholarship Endowment

Restricted to: _____

(see www.keene.edu/development or contact our office for a list of options)

Payroll Deduction: I would like to contribute through payroll deduction.

I hereby authorize payroll deduction in the amount of \$_____ per pay period, for:

_____ (number of) consecutive pay periods, for a total gift of \$_____.

-or-

indefinitely.

(Note: Bi-weekly deductions may be for as little as \$1. Unfortunately, payroll deduction is not available for complementary staff and adjunct faculty members at this time.)

This gift is anonymous. Please do not list my name in the Annual Donor Honor Roll.

Signature: _____ Date: ___/___/___

I understand that payroll deduction may take a few weeks to process but will occur no later than one month after this form is received by Advancement Services.

DONOR INFORMATION (Please Print)

Name: _____

Spouse (if joint gift): _____

Home address: _____

Telephone: _____ email: _____

Please indicate if you are:

Faculty PAT Op-Staff

[Internal processing please, do not write in this section]

Please complete this ENTIRE FORM and return it to Advancement Services, MS - 2701. If you have any questions, please contact Heath Bailey (x82375; hbailey@keene.edu) or Michelle Fuller (x82350; mfuller@keene.edu).