

EMPLOYEE GIVING TO FURMAN

STEP ONE: CHOOSE YOUR GIFT

Payroll Deduction

- This form amends my previous payroll deduction. *Select if applicable.*
- I authorize Furman University to deduct \$ _____ per pay period.

This amount will be renewed each year until such time as I notify the Development Office (ext. 3465) to end or to alter the deduction.

Payroll and Monthly Deductions Options/Examples

Annual Gift	Biweekly Pay	Monthly Pay
\$26	\$1.00	\$2.17
\$50	\$1.93	\$4.17
\$75	\$2.89	\$6.25
\$100	\$3.85	\$8.34
\$150	\$5.78	\$12.50
\$200	\$7.70	\$16.67
\$250	\$9.62	\$20.84
\$300	\$11.54	\$25.00

Outright Gift

- Check Amount Enclosed \$ _____ (payable to Furman University)
- Credit Card Amount \$ _____

CARD TYPE _____ Visa _____ MC _____ AMEX _____ DSCV

NAME ON CARD _____

CARD NUMBER _____ EXP. DATE _____

STEP TWO: CHOOSE AREA YOU WISH TO SUPPORT

The following funds are available to select for payroll deduction. You may donate to multiple funds using payroll deduction.

- | | |
|---|---|
| \$ _____ Current Operating Needs | \$ _____ Furman United
(need based scholarships) |
| \$ _____ Faculty Scholarship Fund | \$ _____ Paladin Scholarship
(athletic scholarships) |
| \$ _____ Parents Fund | \$ _____ Staff Community Scholarship Fund |
| \$ _____ Undergraduate Research and Internships | |
| \$ _____ TOTAL Payroll Deduction | |

If you would like to give to another area of campus, please make a recurring gift by visiting furman.edu/giving

STEP THREE: CONTACT INFORMATION

SIGNATURE: _____ DEPARTMENT/AREA: _____

PRINT NAME: _____ FURMAN ID: _____

THANK YOU FOR YOUR SUPPORT!

Please return this form in the enclosed envelope. Contact Emily Peck at ext. 3465 or emily.peck@furman.edu with any questions.