



Faculty / Staff

Foundation Contribution Form

I wish to have my contribution deducted via payroll deduction:

Name: _____

Amount to be deducted per month \$ _____
Number of Months _____ or until _____

I wish to make a one-time donation:

My check is enclosed for \$ _____

I would like for my contribution to support the following fund: _____

If you are enrolled in payroll deduction and wish your deduction to remain the same, you do not need to complete this form

YEARLY DONOR GIFT LEVELS	◆	DEDUCTION PER MONTH
Matthew Society \$1,000		\$83.33
Mark Society \$500		\$42.67
Luke Society \$250		\$20.83
John Society \$100		\$8.33

*These are suggested giving levels...
....any amount is appreciated.*

Signature: _____

Date: _____

*Thank you for your support of the
Athens State University Foundation.*

Rick Mould

Vice President for University Relations

**Please return this form to the
Payroll Office in Founders Hall**

