

LYCOMING FACULTY & STAFF PAYROLL DEDUCTION FORM



LYCOMING COLLEGE

Date: _____

CONTACT INFORMATION:

Name: _____ Campus Box: _____ Extension: _____

Email: _____ Spouse/Partner Name: _____
(if gift will be in both names)

My spouse works for a company that will match our gift.

Please obtain the appropriate matching gift forms from your spouse's human resources office and return to KGC, Box 165.

PAYMENT INFORMATION (select one):

Gift by Payroll Deduction

Please deduct the following from my paycheck beginning with the next pay cycle.

\$2 \$5 \$10 \$20 \$50 Other \$ _____

One-time
 Monthly
 Biweekly

Select option for payroll deduction:

I authorize this gift to be automatically deducted from my paycheck for the next 12 months.

I authorize this gift to be automatically renewed each fiscal year until I notify the Lycoming Fund in writing or terminate employment.

Gift by Credit Card

Gift Amount \$ _____

Card No. _____

Exp. Date _____ CVV _____

Signature _____

Gift by Cash/Check

Gift Amount: \$ _____

Make check payable to **Lycoming
College.**

Scan the QR code to complete this form online.



PLEASE DESIGNATE MY GIFT TO:

- | | | | |
|---|--|--|--|
| <input type="radio"/> Where it is needed most | <input type="radio"/> Study Abroad | <input type="radio"/> Choir | <input type="radio"/> Warrior Club (Sport) |
| <input type="radio"/> Student Emergency Fund | <input type="radio"/> Leadership Development | <input type="radio"/> Band | _____ |
| <input type="radio"/> Scholarships | <input type="radio"/> Snowden Library | <input type="radio"/> Jackie Bilger Scholarship | |
| <input type="radio"/> Academic Programs | <input type="radio"/> Campus Facilities | <input type="radio"/> Bea Gamble "Momma B" Scholarship | |
| <input type="radio"/> Research & Internships | <input type="radio"/> Mental Health & Wellness | <input type="radio"/> Other _____ | |

If you have an interest in creating a named annual gift to support scholarships, research, internships, or study abroad, please contact the Office of Advancement at lycomingfund@lycoming.edu.

Please mail to Campus Box 165. Please direct questions to ext. 4353.