

# STETSON UNIVERSITY

## FACULTY and STAFF GIFT/PLEDGE FORM

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ ID# \_\_\_\_\_

Department \_\_\_\_\_ Unit # \_\_\_\_\_ Campus Phone # \_\_\_\_\_

**I prefer to make this pledge or gift through one of the following methods:**

### 1. Payroll Deduction

I would like to contribute the following amount each pay period: \$ \_\_\_\_\_

I am:      Non-Exempt (24 payments per year)      Exempt (12 payments per year)

(This pledge will be continuous until you notify the Development Operations Office at Ext. 7463 to adjust it.)

*Here is an example of how your gift adds up:*

NON-EXEMPT		EXEMPT	
Amount Per Pay Period (24 payments)	Total Gift Over 12 Months	Amount Per Pay Period (12 payments)	Total Gift Over 12 Months
\$2.50	\$60	\$5	\$60
\$5.00	\$120	\$10	\$120
\$10.00	\$240	\$20	\$240
\$20.00	\$480	\$40	\$480
\$42.50	\$1,020	\$85	\$1,020

### 2. Check

A check in the amount of \$ \_\_\_\_\_ for my gift is enclosed.

### 3. ACH Debit from Bank Account

Bank Account Number: \_\_\_\_\_ Bank Routing Number: \_\_\_\_\_

### 4. Credit Card

Please charge my gift of \$ \_\_\_\_\_ to:    Visa    MasterCard    American Express    Discover

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name as it appears on credit card: \_\_\_\_\_

*This gift is to be used for:*

**Annual Fund for student scholarships** \$ \_\_\_\_\_

**Department** \$ \_\_\_\_\_ **Please specify department:** \_\_\_\_\_

**Other** \$ \_\_\_\_\_ **Please specify designation:** \_\_\_\_\_

My spouse's company is a matching gift organization \_\_\_\_\_  
*company name*

I would like information about a gift that would provide lifetime payments ([www.stetson.edu/plannedgiving](http://www.stetson.edu/plannedgiving)).

\_\_\_ I have included Stetson in my will or estate plan.    \_\_\_ I would like information about including Stetson in my will or estate plan.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I/We understand that this pledge may be adjusted should circumstances demand. Statements of intent are not legally binding.*

Please send completed form to the Office of Development, Unit 8286. If you wish to make a change to this pledge in the future or have any questions, please contact this office at Ext. 7463. If you choose payroll deduction, it will be effective no later than 30 days after receipt. Please verify your pay stub.

Your gift is tax deductible as allowed by law.