OFFICE OF ADVANCEMENT

EMPLOYEE GIVING - COMMITMENT FORM

| Name: | | | Date: _ | |
|--|------------------------------|--------------------------|-------------------|------------------------|
| Department: | | | | |
| Alternate Phone: | | | | |
| Alternate Email: | | | | |
| | WAYS | S TO GIVE | _ | |
| Payroll Deduction - Effe per pay period (if you ch St. Francis Fund and will discontinue the deduction | oose payroll continue ind | deduction, gifts | s will be designa | ated only to the |
| o Pledge - I pledge a contribution of \$ Please send me a pledge reminder. | | | | |
| o Check - I've enclosed a d | check payab | le to St. Francis | College for \$ | |
| o Give Online - https://w | ww.sfc.edu/ | <u>alumni/give-to</u> | -sfc/make-a-g | <u>ift-online</u> |
| Credit Card (select one) | Visa | Mastercard | _ Discover | Amex |
| Please charge my credit card i | n the amount | of \$ | | |
| Card Number | Exp | iration Date | CVV | - |
| Signature: | | |)ate: | _ |
| GIFT DESIGNATION: The St. Francis | Fund-support | ting the College's | oiggestpriorities | |
| l would like to make this gift in honor General Scholarships, Athletics, Academic Dep | of partment, the Libra | ry, Professional Develor | oment, etc.) | _ (e.g. individual(s), |
| Please visit https://ww2.matchesemployenger | | | our partner work | ks for a |

PLEASE COMPLETE AND RETURN THIS FORM:

- Via email (preferred) to advancement@sfc.edu
- Via interoffice mail (Room 6204)