



Employee Giving Form

Name (please print): _____

I am committed to the success of Saint Paul College students and would like to:

Make a **one time** gift of \$ _____ by cash or check made out to *Friends of Saint Paul College*
 I would like to be a **sustaining donor**. Please keep my payroll deduction in place until I notify you in writing or I leave my position with Saint Paul College.

Payroll Deduction Options

Deduction per pay period		if you work on a 12 month contract	or if you work on a 9 month contract
\$5.00	=	\$130.00	\$90.00
\$10.00	=	\$260.00	\$180.00
\$15.00	=	\$390.00	\$270.00
\$20.00	=	\$520.00	\$360.00
\$25.00	=	\$650.00	\$450.00

Note: Your total calendar (tax) year donation will vary depending on when your payroll deduction starts. These figures are for illustration purposes only.

Other: I would like to pledge \$ _____ per pay period beginning as soon as possible.

CHOOSE YOUR FUND*

- Student Emergency Fund
- Faculty/Staff Scholarship Fund
- Student Basic Needs Fund
- Where needed most
- Sunshine Fund
- Other Program Fund**
- Other Designation _____

* For split gifts or other special arrangements, please speak with a Foundation staff member.

** For questions about existing Program Funds, please speak with a Foundation staff member.

Please list me in recognition materials

I wish to remain anonymous

Signature: _____ Date: _____

Please email this pledge form to friends@saintpaul.edu or you can drop off this pledge form to mail slot 442 on campus (for one-time gifts with a check or cash, please seal in an envelope). You can mail it to the FoSPC Foundation as well: 235 Marshall Ave. St. Paul, MN 55102. You may increase, decrease or suspend your gift by calling the *Friends of Saint Paul College* at 651.846.1469 or friends@saintpaul.edu

Thank you for making a difference!

To pay by credit card or give online, please go to <http://www.saintpaul.edu/alumni/give>