



ANNUAL FUND

St Francis House - Phone Ext. 2461 - Fax: 518-786-5010 - Email: annualfund@siena.edu

Faculty and Staff Payroll Deduction Commitment Form

_____ I would like to make an Annual Fund pledge in the amount of \$_____ with payment prior to May 31.

OR

_____ I would like to make an Annual Fund donation in the amount of \$_____. My check is enclosed.

OR

_____ I would like to make an Annual Fund donation by means of a credit card. Please charge my donation of \$_____ to my card (MasterCard or Visa only)

Card # _____ Exp Date _____

OR

_____ I would like to have \$ _____ deducted per pay period.
I recognize that my payroll deduction contribution will stay in effect until such time as I change it via formal notification by emailing Human Resources at humanresources@siena.edu and Annual Fund at annualfund@siena.edu.

_____ I would like to make a **one-time** payroll deduction for the current fiscal year in the amount of \$ _____ deducted from my next pay period.

Name: _____
(please print)

Signature: _____

Department: _____

Date: _____

Please return the completed form to the Annual Fund Office, St Francis House. Questions regarding this form may be directed to Annual Fund staff at 518-783-2461 or via email at annualfund@siena.edu.

Thank you for your support!