



Johnson C. Smith University

150 YEARS of UNDENIABLE PROGRESS

1867 - 2017

Tomorrow is What We Make It Comprehensive *Faculty/Staff Campaign Form*

Name: _____ Department: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

All gifts of all sizes are appreciated; we also offer for your consideration 150th Anniversary commemorative gift amounts of \$15, \$150, \$1,500 or more.

Gift Designation:

Gift is credited to (you may apply your gift to as many funds of your choice):

JCSU Fund _____ President's Gap Scholarship Fund _____ Athletics Fund _____

Band _____ General Scholarships _____ Other Fund _____

Method of Gift:

Option 1: I authorize payroll deduction for:

\$ _____ monthly for a total gift of \$ _____ over 12 monthly pay periods.

\$ _____ monthly *recurring with no end date.*

\$ _____ bi-weekly for a total gift of \$ _____ over 26 bi-weekly pay periods.

\$ _____ bi-weekly *recurring with no end date.*

To stop a recurring gift, please contact the JCSU Payroll Office at x1086.

Option 2: I authorize a multi-year payroll deduction for:

Year	Fund	Amount Deducted bi-weekly/month	Total amount for 12 month period
20__			
20__			
20__			
20__			
20__			

Option 3: One-time Gift - Check/Cash/Credit Gift

I, _____ (print name) am making a one-time contribution of \$ _____ for the 2016-2017 JCSU Faculty/Staff Campaign.

Circle one: Check /Cash attached AMEX DIS VISA MC

Credit Card #: _____

Exp. Date: _____ Security Code: _____ (located on back of card)

Signature: _____ **Date:** _____

For additional information on making your gift, please contact Katrina Gordon, Data Analyst, kgordon@jcsu.edu or x1424 or Melissa Davis, Annual Fund Officer, at mdavis@jcsu.edu or x3577.