CAMPUS COMMUNITY CAMPAIGN









Marywood

CONTRIBUTION FORM

Na	me Date
Department	
Ph	oneE-mail
I would like my contribution to support the following:	
	Marywood Fund/Area of Greatest Need
	Marywood Scholarship Fund
	Other:
3 WAYS TO GIVE	
1.	PAYROLL DEDUCTION I will contribute to the Campus Community Campaign with a per paycheck deduction of \$ beginning (month/year)
	so long as I am a Marywood University employee or until such time I determine to either amend or cancel.
	Signature Date
	(REQUIRED) The University cannot deduct money from your paycheck without your signature.
2.	□ SINGLE GIFT \$ □ Payment Enclosed □ Send a reminder in the month of
3.	☐ RECURRING MONTHLY, QUARTERLY, OR ANNUAL GIFT via credit card or bank account.
	\$every month/quarter/year (please circle)
	☐ Attached voided check for Direct Funds Transfer (EFT) from checking or savings account.
	☐ I authorize Marywood to charge my ☐ Visa ☐ Master Card ☐ Discover ☐ American Express
	Card NumberExpiration Date
	Name on Card Today's Date