

EMPLOYEE PAYROLL DEDUCTION FORM

YES – I would like to partner with the Pierce College Foundation to help create possibilities.

Name _____ Employee SID#: _____

Address _____

City/State/Zip _____

Please Only Use My Work Address

Home Phone _____ Office _____ E-mail _____

I make the following gift:

One time gift of \$_____.

Payroll Deduction Per Pay Period: _____ (min. \$5/pay period)

Beginning Date: _____ Ending Date: _____

I would like my gift to support the following need:

Pierce's Greatest Need

Scholarships

Other

General or Named: _____

Signature: _____ Date: _____

I understand that this gift is meant as a commitment. However, it is not the policy of the Pierce College Foundation to press for payment in the event of unforeseen circumstances, which would make fulfilling the gift a hardship on my family or heirs.

I wish my gift to be confidential.

I give permission for my gift to be recognized on donor lists.

Tax receipts will be issued at the end of each calendar year.
For more information, please contact Suzanne Freeborn.
Phone Number: [253-864-3220](tel:253-864-3220) Email: sfreeborn@pierce.ctc.edu

THANK YOU!

Possibilities. Created.