

Personal Information

Name	Last	First	Middle	Last 4 of SSN	AIS No.
Home Address	Street Address	City	State	Zip Code	
Campus Address	Department	School or College	Mail Code	Campus Phone	
I am paid	Monthly	Semi-Monthly	Bi-Weekly		

Gift Amount


I hereby authorize Southern Illinois University, as an agent of the State of Illinois, to deduct from my earnings and deposit with the SIU Foundation each month, beginning _____, 20____, the amount checked below.
month and day year

The deduction(s) authorized on this card is/are:	In <u>addition</u> to current deductions	To <u>discontinue & replace</u> all current deductions.	To <u>discontinue & remove</u> all current deductions.	
Deduct:	Century Club Membership (\$8.34 per month)	Dean's Club Membership (\$41.67 per month)	Chancellor's Council Membership (\$83.34 per month)	Other (\$ per month)

Gift Designation

Check one: My gift is fulfilling a current pledge. (list account(s) below)
 My gift is unrestricted.
 My gift is designated for: (list account(s) below)

_____	ACCOUNT TITLE	_____	MONTHLY AMOUNT
_____	ACCOUNT TITLE	_____	MONTHLY AMOUNT
_____	ACCOUNT TITLE	_____	MONTHLY AMOUNT
_____	ACCOUNT TITLE	_____	MONTHLY AMOUNT

 I reserve the right to change or revoke this authorization by submitting a written revocation form to the Southern Illinois University Foundation.

 Signature Date

SIU Carbondale and the SIU Foundation retain six percent of all gifts to enhance philanthropic-related initiatives.

If you have any questions, please contact Heather Hollman (618) 453-4935 or email heatherh@foundation.siu.edu.