

EKU Employee Giving Payroll Deduction

Donor Information:

Name _____ EKU ID _____

Preferred Mailing Address _____

City/State/Zip _____

Email Address _____

Designation:

- THE EASTERN FUND
- STUDENT ASSISTANCE FUND FOR EASTERN (SAFE)
- OTHER, RESTRICTED TO _____
 - For a comprehensive list of funds, please visit go.eku.edu/give

My Gift:

- OPTION 1: ONE TIME GIFT**
 - Please deduct \$ _____ from one paycheck one time.
- OPTION 2: CONTINUOUS GIFT**
 - Please deduct \$ _____ every paycheck. I understand this gift will automatically renew every fiscal year until I request, in writing, to discontinue or am no longer employed by the University.
- OPTION 3: GIFT IN INSTALLMENTS***
 - I would like to donate a total amount of \$ _____ to be fulfilled in installments of \$ _____ per paycheck for _____ paychecks. (Please allow up to two weeks for gift to be processed and deductions to begin). *Necessary adjustments may be made to amount per paycheck based on employee’s status/number of paychecks per fiscal year.

Signature:

Employee Signature _____ **Date**

Thank you for your commitment to Eastern Kentucky University! Please contact the Office of Annual Giving at giving@eku.edu or (859) 622-GIVE with any questions.

Please sign form and return to Coates 19A or giving@eku.edu

In office use only		
<input type="radio"/> Team EKU-857 <input type="radio"/> Colonel Club-851 <input type="radio"/> WEKU-859	Reference # _____ <input type="radio"/> Multiple account allocation. Please leave reference field blank	Initials: Date: