

LEWIS-CLARK STATE COLLEGE

Be a Warrior Who Gives!

I would like to **BEGIN / CHANGE / CANCEL** (CIRCLE ONE) payroll deduction.
 I would like this to be effective _____ (pay date).

Name: _____

Date: _____

Department: _____

- ◇ 1st Pay Date (12)
- ◇ 2nd Pay Date (12)
- ◇ All Pay Dates (26)
- ◇ One-time gift
- ◇ No changes

Place a check mark before each area you'd like to support, cancel, or change with NEW amount. Leave blank if cancelling.

INSTITUTIONAL AREAS 736	AMOUNT
Alumni Association	\$
AmeriCorps Campus Pantry	\$
Building Projects <i>Please specify:</i>	\$
Department/Division <i>Please Specify:</i>	\$
Kids' College	\$
LC Cares	\$
LC Learning Garden	\$
Library	\$
Scholarship <i>Please specify:</i>	\$
Work Scholars Program	\$
CENTER FOR ARTS & HISTORY/ CONTINUING EDUCATION & COMMUNITY EVENTS 740	AMOUNT
CAH Membership	\$
Friend of the Dogwood Festival	\$
OTHER AREA	AMOUNT
<i>Please Write In:</i>	\$

ATHLETICS 739	AMOUNT
Warrior Athletics Association (WAA)	\$
Baseball	\$
Basketball - Men	\$
Basketball - Women	\$
Cross Country - Men	\$
Cross Country - Women	\$
Golf - Men	\$
Golf - Women	\$
Tennis - Men	\$
Tennis - Women	\$
Track - Men	\$
Track - Women	\$
Volleyball	\$
FACULTY/STAFF ORGANIZATIONS	AMOUNT
Classified Staff Organization 743	\$
Faculty Association 742	\$
Faculty Benevolence Fund 738	\$
Professional Staff Organization 737	\$

TOTAL DEDUCTION: _____

Please return to Human Resources or the College Advancement office.

Authorization:

I authorize the payroll deduction for the amount indicated above. I understand that this deduction will continue until I notify the Payroll Office (Human Resources) otherwise.

Signature: _____

Date: _____

If you have any questions regarding areas of giving or the payroll deduction process, please contact the College Advancement office at 792-2458 or visit <http://www.lcsc.edu/giving/fsgiving/>