GORDON STATE COLLEGE

Campus Campaign 2023-24

Name _____ Department _____

Mailing Address_____ City_____ State _____ Zip _____

PAYROLL DEDUCTION

CONTINUE CURRENT PAYROLL DEDUCTION [ ]

To change your current deduction fill in the new per month amount below.
To discontinue your payroll deduction contact HR.

$_____ PER MONTH

**Payroll deductions automatically renew each academic year and remain in effect until you notify the payroll office in writing/email.*

$_____ ONE-TIME GIFT

I authorize this payroll deduction as my gift to support the Gordon State College Foundation.

Signature_____ Date _____

GIFT ENCLOSED

$_____ CASH *(Please deliver to Advancement Office in Lambdin 324 for receipting.)*

$_____ CHECK #_____ Dated_____ *(Please make checks payable to GSC Foundation)*

CREDIT CARD

$_____ DATE GIVEN _____

Give by credit card online at the link below. Choose "Credit Card Donations."

https://www.gordonstate.edu/give

DESIGNATION

Friends of Gordon Annual Fund (18.52% will support GAP funding) *This is the default.*

Specific Fund or Scholarship*:_____

**To view the list of funds and scholarships visit:*
https://www.gordonstate.edu/give

Contributions are tax-deductible. No goods or services were provided in exchange for this contribution. ***Thank You!***

FOR PAYROLL USE: NEW CONTINUING: Same Increase Decrease

Bi-weekly 12-month 10-month 8-month

Deduction starts:_____ Remaining Pay Periods until 6/30/24_____ Projected contribution thru 6/30/24:_____