

# RU Circle of Giving

FACULTY/STAFF CAMPAIGN

## *Automatic Payroll Deduction Plan*

**RADFORD UNIVERSITY FOUNDATION, INC.**

If you wish for your contribution to the Radford University Foundation, Inc. to be deducted directly from your paycheck, please complete this form and return it to the Foundation at P.O. Box 6915, Radford, VA 24142.

Name: \_\_\_\_\_ Employee ID #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone (        ) \_\_\_\_\_ Work Phone (        ) \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Thank you very much for your support this year. Contributions are tax-deductible as allowed by law.**

*"We expect support from our alumni and our constituents, but there are not enough reasons for them to support us if we are unwilling to support ourselves. By giving a little each pay period I hope that I am helping, at least in a small way, to contribute to RU's well-being."*

**Dr. Daniel Davidson, Chair  
Business Law Department**

**Deduction Options:** *Choose one of the following*

1. **Continuous Payroll Deduction:** I hereby authorize my employer, Radford University, to deduct an *annual* total of \$ \_\_\_\_\_ from my bi-monthly paycheck in 24 equal installments. This gift will be renewed automatically on an annual basis by the Foundation, until my notification to cancel.
2. **Periodic Payroll Deduction:** I hereby authorize my employer, Radford University, to deduct a total of \$ \_\_\_\_\_ from my bi-monthly paycheck in equal installments, over a total of \_\_\_\_\_ pay periods. This deduction will expire at the end of the designated number of pay periods.

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_ *Phone #* (       ) \_\_\_\_\_

**I wish for the Foundation to use my gift as follows:**

\$ \_\_\_\_\_ Strategic Plan: 7-17 Fund

\$ \_\_\_\_\_ Other: \_\_\_\_\_

