



ish to make a gift to The Fund for Agnes Scott via payroll deduction as outlined below.
Name:
Department:
Agnes Scott ID#:
Signature:
monthly payroll deduction, please return this form to the Office of Development by the third day of the month in which you wish to in your payroll deduction. For bi-weekly payroll deduction, please return this form to the Office of Development at least four weeks r to the start date of your payroll deduction.
DUCTION DETAILS
☐ This is a change to my active payroll deduction and should supersede my previous instructions.
☐ Please include my spouse as the Soft Credit recipient:
ase choose one of the following options:
□ Defined Pledge (Monthly or Bi-Weekly Payroll)
Monthly deduction: \$ x number of pay periods =total
Bi-Weekly deduction: \$ x number of pay periods =total
Beginning (mo/date/yr):
☐ Ongoing Gift (Monthly or Bi-Weekly Payroll)
Beginning (mo/date/yr), please deduct \$from each paycheck until I instruct the Office of Development otherwise.
FT DESIGNATION
☐ Student Scholarships ☐ Faculty Support ☐ Presidential Priorities (area of greatest need)
NOR/MEMORIAL DETAILS
☐ Please make my gift in ☐ HONOR ☐ MEMORY of:
Name and address of honoree or honoree's next of kin:
☐ Please make my gift in ☐ HONOR ☐ MEMORY of:
Name and address of honoree or honoree's next of kin:
COGNITION DETAILS
print and electronic publications, please recognize my giving as follows:
n my name

Thank you for your gift to The Fund for Agnes Scott

Please send this original signed hard copy by campus mail to Sheri Dixon in the Office of Development and keep a copy for your records.