



Employee Giving Pledge Form

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I would like to donate by
Payroll Deduction

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I would like to donate by a
Single Donation

Per Pay Period

I hereby authorize my employer to deduct a total of \$____ per pay period, from my salary until further notice and remit same to Fletcher Technical Community College Foundation as tax-deduction contribution.

Please distribute the allocations as listed below:

____ % Falcon Nest Egg

____ % Scholarships

____ % Unrestricted Funds

\$____ Memorial fund : I'd like to make this donation in memory or honor of _____.

____ % Fletcher Alumni Association

____ % Other

One Time Contribution

I wish to make a single tax-deduction to the Fletcher Technical Community College Foundation in the amount of \$____. This will be a one-time only contribution, not a reduction from my payroll.

Please distribute the allocations as listed below:

____ % Falcon Nest Egg

____ % Scholarships

____ % Unrestricted Funds

\$____ Memorial fund : I'd like to make this donation in memory or honor of _____.

____ % Fletcher Alumni Association

____ % Other

Cash or Check payable to: Fletcher Technical Community College Foundation

Online Giving Portal: <https://fletcher.jotform.com/233326250922955>

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I wish to have my name appear as _____ in the foundation annual report.

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I wish my gift to be anonymous.

Mailing Address: _____ City: _____ Zip: _____

Please complete the form and return it to crystal.wendell@fletcher.edu, monique.crochet@fletcher.edu, or office 200. Fletcher Foundation will turn in paperwork to the Human Resources Department for their records as well.

Please sign below to authorize your payroll deduction pledge in accordance with standards for any other authorized payroll deductions. I hereby waive on behalf of myself, my heirs, successors, agents, and assigns any and all rights of action against the State of Louisiana, its agents, and assigns, arising out of the deduction, failure to deduct, or any other handling of this request for payroll withholding.

Printed Name: _____

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Check only if you are changing your pledge.

Signature: _____

Date: _____