FLETCHER TECHNICAL COMMUNITY COLLEGE

FOUNDATION

PLEDGE FORM

Options for Donation

☐ Payroll Deduction

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

OR

☐ Single Donation

I wish to make a single tax-deduction contribution to the Fletcher Technical Community College Foundation in the amount of $ _____ (One time only contribution, not a deduction from my payroll).

Please distribute the allocations as listed below:

_____% Falcon Nest Egg _____ % Scholarships _____% Unrestricted funds

Cash or Check (payable to: Fletcher Technical Community College Foundation)

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

☐ I wish my gift to be anonymous.

Mailing Address: _____ City: _____Zip: _____

Please complete your pledge form and return it to Nicol.Blanchard@fletcher.edu or Administration Suite 200-H. 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.

Print Name: _____ ☐ **Check only if you are changing your pledge.**

Signature: _____ Date: _____