Clarkson Employee Payroll Deduction Form FY25

Personal Information (Required)

Name (Required): _____

Campus Ext: _____ Campus Box #_____

CU Department: _____

Yes, I would be willing to share my donor testimonial through email or social media communications to help advocate for Clarkson.

Designation (Required)

Please designate my gift to:

The Clarkson Fund

Other (please specify):

Gift/Pledge Information

I would like to give via Payroll Deduction. (Please choose one of the following)
Recurring Gift Option. Please deduct \$ per paycheck until otherwise
instructed.
FY25 Commitment. I would like to make a total gift of \$ in FY25.
Please allow the payroll office to deduct the applicable amount from each
remaining paycheck of FY25 to reach my total gift.

Signature: _____ Date: _____

Thank you for your participation in the FY25 Employee Giving Campaign. Each gift has a tremendous impact on our students and contributes to the well-being of Clarkson now and into the future.

Please return completed form to:

Clarkson University, Melissa Todd, Box 5530, 8 Clarkson Avenue, Potsdam, NY 13699 or scan and email to mtodd@clarkson.edu.

PLEASE NOTE: If you prefer to make a one-time gift, recurring gift, or multi-year pledge with your credit card or bank account, please visit <u>clarkson.edu/fsgive</u> to do so. Gifts for FY25 are counted when made from July 1, 2024 – June 30, 2025.

Questions? Contact me at 268-3734 or mtodd@clarkson.edu

Appeal Code: FSTS25

Sample Payroll Deduction: Per pay period for a full year		
Total Gift	Amount Per Paycheck	
\$5,200.00	\$200.00	
\$2,600.00	\$100.00	
\$1,950.00	\$75.00	
\$1,300.00	\$50.00	
\$520.00	\$20.00	
\$390.00	\$15.00	
\$260.00	\$10.00	
\$130.00	\$5.00	
\$100.00	\$3.85	