

FACULTY AND STAFF DONATION FORM

YES! I/we would like to support Doane College.

Name

Department/School

Designation Options

- Doane Fund - School of Arts & Sciences
- Doane Fund - School of Graduate and Professional Studies
- Other

Gifting Options

You can also make your gift securely online at www.doane.edu/give.

- Please deduct _____ monthly as a recurring donation from my paycheck, beginning _____. This amount will continue until I advise Advancement to alter or cancel the deduction.
- Please deduct a one-time gift of _____ from my _____ paycheck.
- Enclosed is my check/cash for a one-time gift in the amount of _____. Please make checks payable to Doane College.
- Please charge _____ to my credit card.
 - VISA MasterCard Discover
 - One time Monthly Until I cancel Until _____

Cardholder Name

Expiration Date

Card Number

CVV Code

Signature _____

(Required for credit card payments, payroll deduction or to establish a pledge.)

- Please have a Doane College staff member contact me about planned giving.

Gifts are tax deductible as allowed by law.

If you are currently participating in the payroll deduction program or making a recurring credit card gift, there is no need to return this form unless you would like to change the designation or amount of your gift.