



EAST STROUDSBURG UNIVERSITY FOUNDATION

PAYROLL DEDUCTION FORM East Stroudsburg University

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____ (C) _____

E-mail: _____

ESU Title and Department: _____

- This is a new gift. I hereby authorize the Commonwealth of Pennsylvania to deduct \$ _____ biweekly from my paycheck starting: _____/_____/_____.*
This is a revision to my current payroll deduction. I hereby authorize the Commonwealth of Pennsylvania to change my current payroll deduction amount of \$ _____ to \$ _____ biweekly from my paycheck starting: _____/_____/_____.*

Please designate my gift to (if selecting more than one, please indicate a specific amount for each):

- Warrior Fund (Area of Greatest Need)
College of Arts and Science
College of Business Management
College of Education
College of Health Sciences
Athletics
Graduate College
University College
Student Emergency Scholarship Fund
Other: _____

My spouse works for a matching gift company. Spouse's Full Name: _____ Company Name: _____

(Call his/her personnel office or visit www.esufoundation.org / matching gifts to see if a company participates.)

I would like to speak with someone from the ESU Foundation regarding:

- Additional Gift Options
Establishing a Scholarship Fund
Including ESU Foundation in my Estate Plans
Other: _____

Employee Signature: _____

www.esufoundation.org/payrolldeduction

*Enrollment in payroll deduction will be continuous until you request to be removed.

Please send your completed form to the East Stroudsburg University Office of Human Resources in the Reibman Administration Building or submit your information online at www.esufoundation.org/payrolldeduction. Please call Human Resources at ext. 3422 or the ESU Foundation at ext. 3333 with questions. You can also make a one-time or recurring credit card gift online at www.esufoundation.org. All gifts made to the ESU Foundation are tax deductible to the extent allowed by law.