

# FACULTY/STAFF ANNUAL CAMPAIGN

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Work Extension: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: State: Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_



## PAYMENT OPTIONS

Enclosed is my gift of \$ \_\_\_\_\_

**PAYROLL DEDUCTION** (Minimum \$10 per pay period)

Payroll deduction of \$ \_\_\_\_\_ per pay period  
for a grand total of \$ \_\_\_\_\_

Payroll deduction of \$ \_\_\_\_\_ per pay period  
until employment ends.

One-time payroll deduction of \$ \_\_\_\_\_

## CREDIT CARD DONATION

Credit card gift of \$ \_\_\_\_\_

Visa  MasterCard  Discover  AMEX

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_ Security code \_\_\_\_\_

Signature: \_\_\_\_\_

## TRIBUTE INFORMATION

In Honor of: \_\_\_\_\_  In Memory of: \_\_\_\_\_

Mail a tribute acknowledgment letter on my behalf to: (the amount of the gift will be confidential)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: State: Zip: \_\_\_\_\_

## HOW TO USE MY GIFT

MWU  CCOM  CCP  CHS  CDMI  CCO  CGS

Program \_\_\_\_\_

Student Scholarships:

MWU  CCOM  CCP  CHS  CDMI  CCO  CGS

Program \_\_\_\_\_

Campus Beautification:

Tree (Minimum \$500)\*  Bench (Minimum \$1,000)\*  Picnic Table (Minimum \$1,200)\*

Other, please specify \_\_\_\_\_

\*Name plates are made for gifts marked with an asterisk. Please indicate the plate inscription without exceeding 150 characters: \_\_\_\_\_

## PLEASE RETURN THIS FORM TO

Development & Alumni Relations | Midwestern University | 555 31st Street | Downers Grove, IL 60515  
Please call 630-515-6123 or email [development@midwestern.edu](mailto:development@midwestern.edu) with any questions.