



THE TALENTS ENTRUSTED TO OUR CARE
The Campaign for Muhlenberg College

Request for Payroll Deduction

*I believe in building our library, technology and faculty development resources;
I believe in preparing students to be leaders in service to others;
I believe in providing our students the necessary tools to achieve academic success;
And I believe in supporting The Muhlenberg Fund, through which these ideals are possible!*

Name(s) _____

Home Address _____

Phone _____

Department _____

*I request that the following monthly payroll deduction be established
to provide my annual gift to The Muhlenberg Fund.*

Monthly Amount _____

Beginning month/year _____

Ending month/year _____

Please designate my gift for:

____ **The Muhlenberg Fund - Unrestricted**

____ **The Muhlenberg Fund - Restricted Purpose:** **Financial Aid** **Wescoe School**

____ **Other – please specify:** _____

Signature

Date

Please return to Kim Anderson in the Office of Development.
Should you have any questions, please contact Kim by phone at x3227.