



IMSA Fund for Advancement of Education

Employee Payroll Deduction Authorization Form

Your donation to the IMSA Fund helps support IMSA students and programs and sends a strong message that IMSA employees believe in IMSA's mission. Thank you for your support of IMSA and the IMSA Fund!

Employee Name: _____ **Dept:** _____

I pledge \$_____ as a semi-monthly recurring gift to the IMSA Fund for Advancement of Education's annual fund program. I authorize these deductions to be made from my semi-monthly paycheck until I change these arrangements in writing (please allow thirty days) or am no longer employed by IMSA.

Designate my contribution to: *(check one)*

- ☐ IMSA's Greatest Needs
☐ Other: _____

IMSA Fund Donor Recognition:

- ☐ I would prefer to be listed in donor recognition materials as:

You could use a more or less formal name and/or include your spouse or partner.

- ☐ I would like to be listed as "anonymous" in all donor recognition materials.

Donations to the IMSA Fund for Advancement of Education, a 501(c)(3) nonprofit corporation, are tax deductible in accordance to an individual's tax status.

Your Signature: _____

Date: _____

Please return this form to Jody Beckford, Development Office.
 Questions? Please contact Jody at x5045 or jbeckford@imsu.edu.

Thank you for your participation and support!