



Name(s): \_\_\_\_\_

ID \_\_\_\_\_

Signature \_\_\_\_\_

☐ Please write your name(s) as you'd like it to appear for recognition: \_\_\_\_\_

☐ I wish to have my/our gift remain anonymous.

#### I WANT MY GIFT TO BE USED FOR

☐ Casual Day Fund - \$3/mo. \$ \_\_\_\_\_

☐ Casual Day Fund - \$36 one-time (annually) \$ \_\_\_\_\_

☐ General Foundation Support \$ \_\_\_\_\_

☐ General Scholarship Fund \$ \_\_\_\_\_

☐ College Success & Sustainability \$ \_\_\_\_\_

☐ Food Pantry \$ \_\_\_\_\_

☐ \_\_\_\_\_ \$ \_\_\_\_\_

**Total \$** \_\_\_\_\_

*Additional programs, equipment, and scholarship funds are available.  
Please visit with a Development staff member to determine the areas that best fit your passion.*

#### I WILL PAY THROUGH PAYROLL DEDUCTION

*I authorize PAYROLL to deduct \$ \_\_\_\_\_ MONTHLY starting in \_\_\_\_\_.*  
(above total)

*Payroll deductions submitted after the 15th of the current month will begin for the next month due to the monthly payroll process. For bi-weekly employees, deductions are withheld the second pay period each month.*

*Deductions will continue until the Development office is notified that you wish to make changes, stop deductions, or are no longer employed at Northeast Community College.*

#### I WILL SEND MY GIFT TODAY

☐ **PLEDGE**

My/our total contribution amount is \$ \_\_\_\_\_ to be  
paid over a period of \_\_\_\_\_ year(s) (up to a maximum of five years).

Pledge payments of \$ \_\_\_\_\_ to be paid

☐ Monthly ☐ Quarterly ☐ Annually

(beginning Mo./Yr.) \_\_\_\_\_

☐ **CHECK or CASH**

Total enclosed \$ \_\_\_\_\_

Please make checks payable to: Northeast Community College Foundation

☐ **ONLINE**

[northeast.edu/giving/donate](http://northeast.edu/giving/donate) or Scan QR Code below.



**THANK YOU FOR YOUR SUPPORT!**