

SIUE DAY 2009

How to Participate in SIUE Day.

Step 1

Determine your preferred method of payment:

- Credit Card** -Visit siue.edu/siueday or complete the payment information inside.

- Check**-complete the payment information inside.

- Payroll Deduction**-complete the payroll deduction information inside.

Step 2

Designate your gift.

In effort to be more cost-effective the list of accounts has been listed online at siue.edu/siueday. Find the account(s) you would like to contribute to and designate inside this form.

Having trouble finding what you're looking for?

Call Julie Babington at 618.650.2378.

Step 3

Return to the SIUE Foundation or your Unit Representative by September 18.

Visit siue.edu/siue.siueday to view list of campus representatives.

Employee Information

Please make address corrections below.

Campus Phone

E-mail

Gift Designation

Amount

1. _____ \$ _____

2. _____ \$ _____

3. _____ \$ _____

Payroll Deduction *(ongoing monthly payments)*

This form may be completed online at siue.edu/siueday or submitted by mail.

- Yes, I would like to contribute through payroll deduction.
- I am currently participating thru payroll deduction and want to be included as giving to SIUE Day. I wish to keep my deductions the same.
- I am currently participating thru payroll deduction and would like to increase my gift. Please complete payroll deduction summary (below).
- I am currently participating thru payroll deduction and would like to change my gift designation. Please complete gift designation and payroll deduction summary (below).

Payroll Deduction Summary

\$ _____ **Per pay period** *(Minimum amount for payroll deduction is \$5 per pay period per fund)*

X _____ **Number of pay periods**

\$ _____ **My monthly pledge total**

Payment Information

- No, I cannot participate at this time.
- I recently contributed \$ _____ and would like to be included as giving to SIUE Day.
- Check enclosed, payable to the SIUE Foundation
- MasterCard Visa AMEX Discover

Amt. _____ Exp. _____

Credit Card Billing Address

City

State

ZIP

Authorized Signature (*for Credit Card or SIUE payroll deduct*)

PLEASE RETURN this entire brochure in the provided envelope **BY SEPTEMBER 18th** to your unit representative or the SIUE Foundation.

SIUE DAY

Contact Information

Julie Babington, *Director of Annual Giving*

SIUE Foundation

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