

## DONOR INFORMATION

Name \_\_\_\_\_

Employee ID number \_\_\_\_\_

Employee signature:  
\_\_\_\_\_

Date for deduction to begin \_\_\_\_\_

I would like to learn more about including SVC in my estate plans (wills, living trusts, retirement accounts, life insurance designations or other types of planned gifts).

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2405 East College Way, Mount Vernon, WA 98273  
www.skagitfoundation.org



**Yes!** I would like to support Skagit Valley College Foundation via payroll deduction. I have indicated the amount to deduct. I understand that I may alter my deduction amount or change the gift designation at any time.

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## PAYROLL DEDUCTION

Payroll deduction amount: \$ \_\_\_\_\_ per pay period

Please check one:

- This is a new payroll deduction
- Add this new payroll deduction to my current payroll deduction
- This new payroll deduction will replace my current payroll deduction

## ONE-TIME DEDUCTION

One-time payroll deduction amount: \$ \_\_\_\_\_

**DESIGNATION** (Please check all that apply)

- Area of greatest need
- General Assistance
- Other (please contact me)
- General Scholarship

Please complete the form and return to the Human Resource Office, CA-130 or by emailing: HR@skagit.edu.