

A NONPROFIT CORPORATION ESTABLISHED FOR THE ADVANCEMENT OF THE STATE UNIVERSITY OF NEW YORK AT OSWEGO

## **SUNY OSWEGO FACULTY AND STAFF GIVING FORM**

## **Step 1: Confirm/Update Your Information**

FIRST NAME	LAST	NAME	
ADDRESS			
CITY, STATE, ZIP			
E-MAIL			
DEPARTMENT			
PHONE			
AUTHORIZATION SIGNATURE			
NYS ID# (Found on your paystub) N			
Step 2: Ways to give			
1. Payroll Deduction I pledge my gift of pe	er pay period to be d	educted from my paycheck.	
<b>2. Check</b> (Please make check payable to: <b>Oswego</b> My check for \$ is enclosed.	College Foundation, I	nc.)	
3. Credit card payment			
Amount \$			
☐ One time gift ☐ Recurring payments \$ per m ☐ Perpetual	nonth for m	onths	
Credit Card number		Expiration	CVV
To make a gift online, please visit <b>alumni.c</b>	swego.edu/givetoda	ay.	
Step 3: Allocate your gift to the followin	ng		
$\square$ Where the need is the greatest	☐ The SUNY Oswego Food Pantry (SHOP)		
☐ Student Emergency Fund	☐ Departme	ent	
☐ General Scholarship Fund	Other		
Step 4: Return your form in a sealed env	/elope to:	To Cancel Payrell Doducti	ian Indicata halaw Camplata
Oswego College Foundation, Inc.	•	Step #1, sign and date abo	ion, Indicate below, Complete
215 Sheldon Hall, Oswego NY 13126			
Questions? Call: 315-312-3003 • Email: devel	op@oswego.edu	i would like to cancer f	my payroll deduction at this time.
	A OSI	N/FGO	

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