

2007-2008 CLARK FUND PAYROLL DEDUCTION FORM

Name(s): _____

Campus Extension(s): _____

Total Amount of Gift: \$ _____

Please deduct from my payroll in equal installments totaling the amount above.

Please deduct from my payroll in a single sum on _____.

Indicate Date

Gift Designation: *check one*

Unrestricted/Clark's Greatest Need

Scholarship

Other: _____

Please check here to make your gift in honor or in memory of the following person(s): _____

Please check here to make your gift anonymously. *Your name(s) will not be listed in donor publications.*

Signature: _____ Date: _____

My signature authorizes Clark University to deduct from my payroll as specified above.

Payroll Office Use Only:

Description	Deduction	Code	Amount-Total	Begin date	End date	Entered ADP by:	Date entered
Unrestricted	CLKUNR	R5511 0000					
Restricted	CLKRES	10801 0000					
Other							