

University of Houston Clear Lake

2018 Faculty and Staff Giving

Name: _____

Department: _____ Empl ID: _____

Spouse/Partner: _____

Giving Designation:

\$ _____ Hawk Advantage Scholarship Fund (CC16048RN)

\$ _____ Hawk Emergency Fund (CC16434RN)

\$ _____ Other _____

Gift Options

I made my gift online at <https://giving.uh.edu/clake/>

Please accept my check or cash gift of \$ _____
(Made payable to UHCL)

Please accept my credit/debit card gift of \$ _____

VISA MasterCard American Express

One time Monthly for _____ months

Card #: _____ Exp Date: _____

If billing address is different than mailing address, please provide billing address below:

Signature: _____ Date: _____

Payroll Deduction Option

Your pledge will be deducted from the first payroll of each month.

\$ _____ Amount of monthly deduction

Please make my monthly deduction in perpetuity

Month and year of first deduction: _____

Month and year of last deduction: _____

I am: Exempt Employee (Monthly payroll)

Non-Exempt Employee (Bi-weekly payroll)

Payroll Authorization

I voluntarily authorize the above monthly deduction from my after-tax wages for a charitable contribution as indicated above. I understand that I may revoke this authorization at any time by giving University Advancement written notice.

Signature: _____ Date: _____

Does your spouse's employer match gifts? If so, please remember to submit their matching gift form with your gift. Please return the contribution form and your gift in the enclosed envelope to University Advancement (MC 318). Questions? Contact Sandra Jacobson, senior coordinator of annual giving, at 281-283-2046 or annualgiving@uhcl.edu.