

*Montclair State University Employees  
Helping Students Succeed*

FACULTY AND STAFF CAMPAIGN 2011-2012  
Gift Form

Full Name: \_\_\_\_\_  Faculty  Staff

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Office ( ) \_\_\_\_\_ Home ( ) \_\_\_\_\_

MSU Department: \_\_\_\_\_ Job Title: \_\_\_\_\_

YES, I wish to support the Montclair State University Annual Fund!

I would like my gift to go to the most critical needs on campus.

Please restrict my gift to : \_\_\_\_\_  
*(school, college, program, department or fund)*

---

**I authorize my gift to be paid by payroll deduction. Please complete payroll deduction form on reverse side.**

My check for \$ \_\_\_\_\_, payable to the MSU Foundation, is enclosed.

I wish to pledge \$ \_\_\_\_\_, payable in (monthly, quarterly, semi-annually) installments. Please remind me when my payments are due. *(Pledges are payable over a period of one year and must be renewed annually.)*

My credit card information is below.

Please charge \$ \_\_\_\_\_ to my  Visa  MasterCard  American Express  Discover

Account # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_ Security Code \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

I want to remember Montclair State University in my estate plans. Please send information.

***Double your gift!*** Does your spouse work for a matching gift company? If so, your gift to Montclair State could be doubled or tripled. Check with the company's human resources department for more information.

*All gifts are tax deductible. Please return form to: Montclair State University Annual Fund  
College Hall – Room 300  
(973)655-7492*