

UNIVERSITY of HOUSTON

Faculty and Staff

YOU ARE THE PRIDE

Name _____ Employee ID _____

Office Phone Extension _____ Department Mail Code _____

Gift Payment Options

PAYROLL DEDUCTION—COMPLETE THIS FORM

Your monthly pledge will be deducted from the first payroll of each month. (Minimum annual deduction is \$60 or \$5 each month over 12 months.)

\$ _____ X Pay Period = _____

12 months 24 months 36 months Other

for a total gift of \$ _____

Start date _____ End date _____

PAYROLL AUTHORIZATION

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

Signature _____

Date _____

CREDIT CARD

You can make a secure online gift at www.uh.edu/giving

Please charge my gift of \$ _____
(Do not complete credit card information below if making an online gift.)

VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Account number _____

Expiration date _____ Security Code _____
(3 digits on back of card)

Name on card _____

Billing address _____

City _____ State _____ ZIP _____

Signature _____ Date _____

CHECK

Make check payable to "University of Houston"

\$ Amount _____

(Send your check and this form to the address below)

Please designate my gift to: General Scholarship Fund \$ _____ Staff Scholarship Fund \$ _____

The Library Excellence Fund \$ _____ The Fund for UH \$ _____

Faculty Senate Endowment \$ _____ Other \$ _____

This gift is made jointly with my spouse. Spouse's name _____

Your contribution is tax deductible to the extent allowed by law.

No matter how you give, please complete this form and return it to the UH Office of Annual Giving, PO Box 867 Houston, TX 77001-0867.

THANK YOU FOR YOUR GIFT! YOU ARE THE PRIDE.

For questions or more information, please contact Margot Frye, Annual Giving, 3-8951, or mfrye@uh.edu.