

HUGives

EMPLOYEE GIVING CAMPAIGN

Employee Name: _____ Employee ID # _____

Option #1: Make an ongoing difference through a recurring payroll deduction

I would like to contribute \$ _____ per paycheck on a recurring basis.

I authorize the Payroll Office to make the deduction noted above. I understand that I will receive a written summary of my yearly gift. I also understand that my contribution will continue until I cancel this authorization by written notice to Erin Smith, Office of Advancement.

Signature: _____ Date: _____

Option #2: One-time gift

Enclosed is a check in the amount of \$ _____

Option #3: GIVE ONLINE! <https://www.heritage.edu/Giving>

I would like my gift to go to: ***Heritage Fund*** ***HU Faculty & Staff Scholarship***

Other (please specify fund) _____

Heritage Fund: *The largest unrestricted source of scholarship funds for students. These funds go to the area of greatest need.*

HU Faculty & Staff Scholarship: *Established by faculty and staff, this is an endowed scholarship fund. Contributions go to the principal, and annually 5% of the principal balance, including earnings, are available to be awarded as scholarships to students.*

Please email this form to Erin Smith at smith_e1@heritage.edu or mail to: 3240 Fort Road Toppenish, WA 98948. If you have any questions, please contact Erin at 509-865-8586, ext.1714.

FOR OFFICE USE ONLY: SCHEN / SFD10 / SFUND / STEMP Notes: _____