



Supporting Hartwick's students every step of the way

EMPLOYEE PAYROLL DEDUCTION FORM

_____ Yes, I want to show my support for the Fundraising Campaign: *Together, We Soar. Hartwick's Bold Campaign for FlightPath.*

Please make my gift of \$_____ through payroll deduction, beginning _____ (Date)

Check 1:

_____ As a 1-time donation

_____ In equal deductions each pay period, \$____ per check

Check 1:

_____ for this Fiscal Year ending June 30th

_____ continuous

I would like to designate my gift to the following priority:

_____ The Hartland Promise program

_____ The Hartwick Fund unrestricted (ongoing support for the College)

_____ FlightPath

_____ Other (Please specify) _____

Name: _____ Date: _____

Signature: _____

Please recognize my spouse/partner as well. Name: _____

If you have any questions, please contact Institutional Advancement at 607-431-4061 or corbettl@hartwick.edu. Your donation is tax deductible to the fullest extent of the law.

Thank you for your generosity!