Please save this form to your computer and open in Adobe Reader to complete

Hamilton College Community Outreach Campaign
2014 Payroll Deduction Form

Name (s)_____ Street _____

City, State_____ Zip_____ Daytime Phone _____

☐ I choose to enroll in the automatic payroll deduction plan through Hamilton College. *(Please complete below.)*

☐ I do not wish to participate via payroll deduction but still want to help and be counted!
I will make direct contributions to the agencies listed below totaling: $_____

☐ Please send me a United Way pledge form (to contribute by check or to direct your gift in a specific way).

Amount of Deduction *Each Pay Period*		Number of Pay Periods in 2014 (Fac/Admin = 12 / Staff/M&O= 52)		**TOTAL 2014 CONTRIBUTION****
$_____	**X**	_____	**=**	$ 0.00

Please designate up to 4 contributions with the **per pay period** amount indicated next to each.

		Total 2014 *Per Pay Period* Gift			**Total 2014 *Per Pay Period* Gift**
☐	A Better Chance of Clinton	$	☐	Legal Aid Society of Mid-New York	$
☐	Abraham House	$	☐	Mohawk Valley Resource Center for Refugees	$
☐	AIDS Community Resources	$	☐	Oneida County Habitat for Humanity	$
☐	American Red Cross	$	☐	Planned Parenthood	$
☐	Catholic Charities of Utica-Rome	$	☐	Resource Center for Independent Living	$
☐	Clinton Central School District Foundation	$	☐	Salvation Army	$
☐	Clinton Early Learning Center	$	☐	Stevens-Swan Humane Society of Oneida County	$
☐	Country Pantry	$	☐	Thea Bowman House	$
☐	Greater Utica Community Food Bank	$	☐	Upstate Cerebral Palsy	$
☐	Hope House	$	☐	Utica Safe Schools (Underground Café Program)	$
☐	Hospice Care	$	☐	Visiting Nurse Association	$
☐	Johnson Park Center	$	☐	YWCA of the Mohawk Valley and New Horizons	$
☐	Kirkland Art Center	$	☐	United Way	$
☐	Kirkland Town Library	$			

TOTAL 2014 CONTRIBUTION **PER PAY PERIOD ****
(Sum of gifts - up to 4 beneficiaries)

Number should equal:
Amount of Deduction – Each Pay Period $ 0.00

Signature _____ Date _____

Your tax-deductible contributions will be sent in quarterly payments to the organization/s you have designated. Your name and home address will be provided with your donation. The organizations are encouraged to send you a receipt for tax purposes. ***You may also use your pay stub as documentation for your charitable contribution.***

☐ Check here if you would like your contribution(s) to remain anonymous to the organization(s) you designate.

Please make a copy of this form for your own records.
Return the original to the Office of the President no later than November 22, 2013.