



Cardinal Commitment Campaign

FACULTY & STAFF PAYROLL DEDUCTION AUTHORIZATION

*Your gift demonstrates your belief in Labette Community College and our students. Thank you for choosing to participate in the **Cardinal Commitment Campaign**! Please return completed form to LCC Foundation & Alumni Office, 1306 Main Street (inside Cardinal Event Center)*

Name: _____ **ID#:** _____

Email: _____

Payroll Deduction

Please deduct the following amount from **each paycheck** beginning with the next available payroll:

- ☐ **\$2.00** ☐ **\$20.00**
☐ **\$5.00** ☐ **Other Monthly Amount:** \$ _____
☐ **\$10.00** ☐ **One-time payroll deduction:** \$ _____

Direct My Gift To

☐ Greatest Need ☐ Student Scholarships ☐ Other: _____

Winner Wednesday

- ☐ **Yes!** Enter me in the monthly **Winner Wednesday** drawing.
☐ **No**, I would rather not participate in the drawing.

Authorization

I authorize LCC to deduct the amount indicated above from my payroll and forward it to the LCC Foundation until I notify the Foundation in writing that I wish to change or discontinue my contribution.

Employee Signature: _____ Date: _____

Together, We Invest in Student Success!

Thank you! Your participation helps demonstrate the commitment of LCC faculty and staff to our students and encourages others to invest in their success.