Wabash College Employee Payroll Deduction Form

Name: ____________________________________________

Address: __________________________________________________________________________

Signature: __________________________ Date: ___________________

To support the mission of Wabash College, I hereby pledge $____________/, to be paid via payroll deduction.

Please deduct $____________/ from each paycheck

Begin date ________________ End date ________________

Please designate my gift to:

WABASH COLLEGE ANNUAL FUND

☐ Scholarships  ☐ Student Life  ☐ Teaching & Learning  ☐ Unrestricted

Other _______________________

Thank you for supporting Wabash College!

Please return this form to the Office of Annual Giving in the Hays Alumni Center. If you have questions about Annual Giving or Advancement at Wabash, please contact Joe Klen, Director of Annual Giving, at klenj@wabash.edu or at 361-6052.