



# Annual Fund

2009-2010

## Faculty/Staff Campaign

**Yes! I want to support SHSU's Annual Fund.**

*Please Print:*

Name \_\_\_\_\_

Department \_\_\_\_\_

Position/Title \_\_\_\_\_

Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

**Designate my gift to:**

- SHSU's Greatest Need
- Student Scholarships
- President's Fund for Excellence
- College, School, Department or Program *(Please specify):*

*(Athletics, Library, Museum, etc.)*

**PAYMENT METHOD**

I will make an outright gift of \$ \_\_\_\_\_

Enclosed is my check payable to Sam Houston State University

Charge my ( ) VISA ( ) MasterCard ( ) American Express

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV Code \_\_\_\_\_

Signature \_\_\_\_\_

I will pledge a monthly amount of \$ \_\_\_\_\_ to be paid by the Payroll Deduction Plan.

*(If you wish to participate in the payroll deduction program, please return the authorization form to University Advancement, Box 2537.)*