



**PAYROLL DEDUCTION DONATION FORM**

*Thank you for your generosity and support of Saint Mary's Students.*

*Please complete this form and send via internal mail to the Advancement Development Office*

*or drop off in person at 867 Robie Street*

*or send via email to [gift.accounting@smu.ca](mailto:gift.accounting@smu.ca)*

*A charitable tax receipt for all donations will be issued through your annual T4 form*

Date: mm \_\_\_/dd \_\_\_/yy \_\_\_

**Please print your name and address below:**

Title: Dr. Ms. Mrs. Miss. Mr. (circle one)

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**My total gift pledged to Saint Mary's University is \$ \_\_\_\_\_\***

**\*\*\*The total pledged amount will be divided by 26 pays per year\*\***

**Gift Designation**

- Santamarian Fund  Athletics
- Scholarships/Bursaries \_\_\_\_\_ (please let us know if you would like your donation directed to a specific fund)
- The Fred Smithers Centre for Student Accessibility  Other \_\_\_\_\_

**Payment Options**

Bi-weekly Payroll Deduction Program. I authorize Bi-weekly payroll deductions of \$ \_\_\_\_\_ to start \_\_\_/\_\_\_/\_\_\_.

For \_\_\_\_\_ years

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- I wish my donation to remain anonymous.
- Please do not publish my name in any donor listing

**Planned Giving**

- I have made provisions for Saint Mary's University in my will.
- I would like to receive information about including Saint Mary's University in my will.
- Please send me information about Planned Gifts (e.g., life insurance policy, bequest).

**Thank You!**