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| **CONTACT INFORMATION**  Name:  Home Address:  City:       State:    Zip:  Home Phone:  Email:  Spouse Name:  Campus Address (Building):  Campus Department:  Campus Phone Number:  Faculty  Staff  UTEP Alum  **GIFT DESIGNATION**  Student Access Gift Fund  Student Excellence Gift Fund  College of  Department of  Division of  Other | **PAYROLL DEDUCTION**  Deduct the following amount each month as long as I am a member of the UTEP Family:  $5  $15  $20  $25  $50  Other $  **AUTHORIZATION FOR PAYROLL DEDUCTION**  I authorize this deduction from my after-tax wage for a charitable contribution as indicated. I understand that deductions will begin with the next available pay period following this submission and will end with the completion of installments as indicated above. I also understand that I may adjust or revoke this authorization at any time with written notice to the UTEP Office of Asset Management and Development.  Employee ID (600#):       Date:  Signature:  **OTHER PAYMENT METHODS**  Enclosed check (Payable to UTEP)  Visa  MasterCard  Discover  American Express  Name on Card:  Card #:  Exp. Date: |

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| C:\Users\jcalzadillas2\AppData\Local\Microsoft\Windows\INetCache\Content.Word\Family Campaign Logo.png | **Print and return completed form to:**  The University of Texas at El Paso  Asset Management and Development | Kelly Hall, 6th Floor | 500 W. University Ave. | El Paso, Texas 79968  Tel: 915.747.8533 | Fax: 915.747.8568 | http://givingto.utep.edu |