

UNT Faculty and Staff Giving Campaign Gift Form

			T	ell us who you are ——
Dr./Ms. Mrs./Mr.	ou		Faculty/ Staff	,
First	Middle	Last	Department/C	College/School/Program
Dr./Ms. Mrs./Mr.	ouse/partne	r		
First	Middle	Last	Employee ID#	Campus e-mail
			Campus phone	Campus address
Home address			☐ I attended UNT from to ☐ I graduated from UNT in	
City	State	Zip		us name(s) if different from
Llama nhana/a mail			your current name:	
Home phone/e-mail				
				- · · · · · · · · · · · · · · · · · · ·
				Designate your gift —
			designation should receive. If Otherwise, include the total gift	you make your gift with payroll you want to make per designation
Please designate my gift t	to:			
1		\$		
2.		· ·		
3		•		
Total		\$ _	divided into	installments.
☐ My spouse works for a com	pany that will match our gift	and a completed for	orm is attached.	
				Make your gift
Payroll deduction I authorize the University of request otherwise.	North Texas to deduct \$	per pay pe	eriod, effective with the next pay	period and continuing until I
· ·		gift amount to \$	per pay period, effecti	ve with the next pay period
☐ I authorize the University of		from the ne	ext pay periods.	
Credit card			Check	
I authorize the University of	North Texas to charge my	credit card for \$	I am enclosin	ng a check, payable to the North Texas for \$
O American Express O D	iscover O MasterCard	O Visa	Offiversity of	
Card number	Expiration	n date		
Billing address (if different than	n home address above)		Signature	
City	Ctata		Date	
Citv	State	Zip		



Questions?
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