Name_________________________________________________ Banner W I.D. ____________________
(please print)

I would like to make a gift of: $_________________ (Total Amount)

I would like my gift to support: (please check/circle the area(s) of importance to you)

☐ Wheaton Fund:
   - Area of Greatest Need
   - Scholarship
   - Arts & Cultural Learning
   - Science, Technology & Library Resources
   - Athletics
   - Strengthening Ties to Community
   - Experiential Learning
   - Sustainability

☐ Lyons Athletic Club
☐ Other (please specify):_______________________________________

Donors with annual gifts of $1,000 or more are recognized as members of the Mary Lyon Leadership Society.

<table>
<thead>
<tr>
<th>Total Amount</th>
<th>Monthly Deduction</th>
<th>Total Amount</th>
<th>Bi-Weekly Deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>$100</td>
<td>$8.34</td>
<td>$100</td>
<td>$4.16</td>
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<td>$250</td>
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<td>$83.50</td>
<td>$1,000</td>
<td>$41.67</td>
</tr>
</tbody>
</table>

Wheaton College’s fundraising year runs July 1 through June 30.

I would like to make my gift through:

☐ Payroll Deduction: Total amount to be deducted per pay period $ bi-weekly monthly
   - Please stop deductions _______________ (month / year)
   - Please continue deductions until June 30, 2019 (end of the fundraising year)

By signing below, you agree to authorize Wheaton College payroll department to deduct the above amount from your pay. If you wish to change or discontinue this agreement, please notify the Gift Processing Department and the Payroll Department.

___________________________________________________________________________________
Signature  Date

☐ Credit Card: MasterCard  Visa  American Express  Discover
   - Credit Card # ____________ Exp Date ____________ Security Code ____________
☐ Check: Enclosed is a check in the amount of $ made payable to Wheaton College
☐ Online: Gifts can be made online https://give.evertrue.com/wheatoncollege/

Anonymous: I would like my donation to remain anonymous. (please circle) Yes No
Matching Gift: My spouse/partner is employed by _____________________________ (a matching gift company).

Please complete this form and bring/send to:
College Advancement | Gift Processing | Mary Lyon Hall, Room 209

Internal Use: Reviewed by Gift Processing (Initial and Date) __________________________