

**TULANE UNIVERSITY  
Direct Deduction Form**

*I would like to make a contribution to Tulane University through Payroll Deduction*

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

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

City, State, & Zip Code: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Office Address: \_\_\_\_\_

City, State, & Zip Code: \_\_\_\_\_

Office Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Gift Designation:**

- \_\_\_\_\_ Tulane University General Support (113702)
- \_\_\_\_\_ Newcomb-Tulane Undergraduate College (111715)
- \_\_\_\_\_ School of Architecture (111003)
- \_\_\_\_\_ A.B. Freeman School of Business (111208)
- \_\_\_\_\_ School of Continuing Studies (113008)
- \_\_\_\_\_ School of Law (111504)
- \_\_\_\_\_ School of Liberal Arts (111214)
- \_\_\_\_\_ Howard-Tilton Memorial Library (113703)
- \_\_\_\_\_ School of Medicine (111626)
- \_\_\_\_\_ H. Sophie Newcomb Memorial College Institute (111706)
- \_\_\_\_\_ Tulane National Primate Research Center (630804)
- \_\_\_\_\_ School of Public Health and Tropical Medicine (111627)
- \_\_\_\_\_ School of Science and Engineering (111303)
- \_\_\_\_\_ School of Social Work (111803)
- \_\_\_\_\_ Tulane Athletics Fund (380600)
- \_\_\_\_\_ Tulane Marching Band (629781)
- \_\_\_\_\_ Tulane Rebuilding Fund (111215)
- \_\_\_\_\_ Other

Starting Date: \_\_\_\_\_ (\*) Ending Date: \_\_\_\_\_ (\*\*)

Amount/Payment Period: \$ \_\_\_\_\_ \$ \_\_\_\_\_ Monthly

Total Gift/Year: \$ \_\_\_\_\_

Total Gift Amount (if donation is a one time gift) \$ \_\_\_\_\_

Please check one: would you like to receive receipt/s monthly \_\_\_\_\_ or yearly \_\_\_\_\_?

\_\_\_\_\_ Check if attached with matching gift claim form from my and/or my spouse's company.

(\*) Any direct deduction that incurs after the 20th day of each month will take effect on the following month pay period.

(\*\*) Give continuously unless otherwise notified.

**Please print this form and fax to the attention of Malinda Sanchez at # (504)865-6763.**