

## Employee Information

Dr. Mr. Mrs. Ms. Other  
 Name \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_  
 Work Phone \_\_\_\_\_  
 Email \_\_\_\_\_  
 PBRC Department \_\_\_\_\_  
**T-shirt size (circle one)** S M L XL XXL

## Payroll Deduction Option

**Gift amount** \$ \_\_\_\_\_ per pay period  
 (see page 2 for payroll deduction table)

### Select your payroll frequency

Bi-weekly (26 times/year) Monthly (12 times/year)

### Enter your LSU ID Number

\_\_\_\_\_

*As a contribution to the Pennington Biomedical Research Foundation, I authorize Louisiana State University to deduct the above amount from my paycheck on a regular basis until otherwise notified.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

## One-Time Donation Option

**Gift/Pledge amount** \$ \_\_\_\_\_

### Select payment type

Check (payable to PBRF)

Cash

Credit Card (may also be made online)

Please send me a pledge reminder on \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Credit Card Processing

Visa MasterCard Amex Discover

Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## Donor Recognition

I/We wish my/our name(s) to appear as follows in the annual report and other donor recognition.

\_\_\_\_\_

Anonymous Gift - Please do not publish my/our name(s) in printed materials.

Please credit my Tiger Athletic Foundation (TAF) Account # \_\_\_\_\_

I'd like to establish a TAF priority points account.

### Payroll Deduction Option

Return your completed and signed form to the Foundation office.

### One-Time Donation Option

Return your completed form with your gift to the Foundation office. Credit card gifts may also be made online.

**PBRF Office:** C. B. Pennington, Jr. Building, Suite 300

**Fax:** (225) 763-3108, Attn: Lindsay Killen - **Email:** lindsay.killen@pbrf.org

*Need more information? Contact the Foundation office at (225) 763-2646.*

## **Sample Payroll Deduction Gift Table**

<b>Number of Pay Periods</b>	<b>Payroll Deduction Per Pay Period</b>	<b>Total Annual Gift</b>
26	\$2.31	\$60
26	\$3.85	\$100
26	\$9.62	\$250
26	\$19.24	\$500
26	\$38.47	\$1,000
26	\$96.16	\$2,500
12	\$5.00	\$60
12	\$8.34	\$100
12	\$20.84	\$250
12	\$41.67	\$500
12	\$83.34	\$1,000
12	\$208.34	\$2,500

All Pennington Biomedical employees who participate in the employee giving campaign will be recognized on the Employee Giving Campaign page in the Foundation's annual report. Additional recognition for gifts of \$1,000 or more per fiscal year will be listed in the annual giving section of the annual report.

## **Annual Giving Recognition Levels**

### **Council of 100**

\$25,000+

\$10,000+

### **Discovery Partners**

\$5,000+

\$2,500+

\$1,000+

### **Prevention Partners**

\$100+

**Thank you for your generous support!**

## **Pennington Biomedical Research Foundation**

Supporting the work of Pennington Biomedical Research Center, which aims to discover the triggers of chronic diseases through innovative research that improves human health.

[www.pbrf.org](http://www.pbrf.org)