



name \_\_\_\_\_  
 address \_\_\_\_\_  
 city state zip \_\_\_\_\_  
 email \_\_\_\_\_  
 phone \_\_\_\_\_  
 department number \_\_\_\_\_

**PAYMENT OPTIONS**

**Payroll deduction:** (minimum deduction amount \$1)

I hereby authorize WMed Payroll to deduct the following as my gift to WMU Homer Stryker M.D. School of Medicine:

- \$ \_\_\_\_\_ per pay period
- maintain my current payroll deduction

Number of Pay Periods:

- continuous\*    26 (one year)    other \_\_\_\_\_
- \*payroll deductions will continue until I request cancellation*
- deductions may be adjusted or canceled at any time*
- new deductions begin on July 1*

\$ \_\_\_\_\_ total, please deduct a one time gift

**Online:** [med.wmich.edu/giving](http://med.wmich.edu/giving)

**Check:** payment for \$ \_\_\_\_\_

Please make check payable to *WMU Homer Stryker M.D. School of Medicine* and submit with this card to:

*Western Michigan University Foundation  
 Re: WMU Homer Stryker M.D. School of Medicine  
 1903 W. Michigan Avenue, Kalamazoo, MI 49008-5403*

**Credit card:** payment for \$ \_\_\_\_\_

- Visa    MasterCard    Discover

account # \_\_\_\_\_

3-digit verification code \_\_\_\_\_ expiration date \_\_\_\_\_

**PLEDGE CARD MUST BE SIGNED:**

signature \_\_\_\_\_ today's date \_\_\_\_\_



*The employee giving campaign provides you with another opportunity to have a direct, positive impact on our mission. No matter the size of your gift, your participation sends a strong message — you believe in WMed and wish its continued success.*

**— Hal B. Jenson, MD, MBA**  
 Founding Dean



**MEANINGFUL GIVING**  
 starts with you



*For more information and ways to contribute, please contact Al Shifflett in the Office of Development at 269.337.GIVE or [al.shifflett@med.wmich.edu](mailto:al.shifflett@med.wmich.edu)*

[med.wmich.edu](http://med.wmich.edu)

## EMPLOYEE GIVING campaign

YOU make WMed a better place. Together, we save lives, advance research, and train the next generation of physicians. Today, we ask you to make another kind of commitment to WMU Homer Stryker M.D. School of Medicine — A GIFT. Your gift to WMed helps us realize our potential to improve the health of our community. You can help ensure that we recruit the best students who desire to become outstanding clinicians, leaders, educators, advocates, and researchers by making a gift to the scholarship fund. You may also decide to direct your gift to an academic department to help enhance education. Every gift is important — and the work you care about will benefit. **That's why your gift matters — every gift, any amount, anytime.**

## when to give

Gifts and pledges of all sizes are welcome throughout the year. Each spring we make an appeal for contributions, especially payroll deduction pledges. Gifts made prior to or after the spring appeal will all count towards the participation goal.

### WHERE DOES THE MONEY GO?

There are no administrative fees; 100% of your gift supports scholarship, projects or programs that enhance patient care, research, and teaching. You may direct your gift(s) to the established endowments listed on the pledge card.

### IS MY GIFT TAX-DEDUCTIBLE?

Yes, 100% of your gift is tax deductible as allowed by law.

### HOW MUCH SHOULD I GIVE?

Gifts of any size or type are welcomed and appreciated. Even a little bit means a lot — especially when the gifts are pooled together! We encourage you to look at payroll deduction on the pledge card; it's a convenient way to make a lasting impact.

## many ways to give

### Payroll Deduction Gifts

It's automatic and convenient, and your gift is spread out through specified pay periods. **Start or adjust a payroll deduction by filling out the Employee Giving Pledge Card and sending it to the Payroll Department.**

### One-time Gifts

One-time gifts are welcomed by check or credit card. Log onto [med.wmich.edu/giving](https://med.wmich.edu/giving) to make your gift by credit card. Checks should be made out to WMU Homer Stryker M.D. School of Medicine and sent with pledge card to:

*Western Michigan University Foundation  
Re: WMU Homer Stryker M.D. School of Medicine  
1903 W. Michigan Avenue, Kalamazoo, MI 49008-5403*

## more options

**Endowments** — Funds invested and maintained in perpetuity.

**Gift of Life Insurance** — Make a large gift with little cost to yourself. Contribute a life insurance policy that is no longer needed.

**Gift of Retirement Assets** — Designate WMed as a beneficiary of part or all the remainder of your IRA or retirement plan.

**Matching Gifts** — Stretch your contribution! Please check with your spouse's personnel office, then send us the form.

**Memorial Gifts** — Made in memory or honor of someone special.

**Naming Opportunities** — An enduring way of honoring benefactors for their generosity, and they serve as visible and active expressions of interest in the advancement of higher education.

**Planned Gifts** — Arrangements made that have specific tax advantages to the donor.

**Bequests:** name WMU Homer Stryker M.D. School of Medicine as a beneficiary in your will or living trust.

**Beneficiary Designations:** name WMU Homer Stryker M.D. School of Medicine as a beneficiary of your retirement plan, life insurance or insurance annuity.

**Pledges** — Make a gift and pay it over time.

**Securities** — Gifts of appreciated securities including stocks, mutual funds, and bonds.

[med.wmich.edu](https://med.wmich.edu)



Use this pledge card for payroll deduction or to accompany your gift.

## GIVING OPTIONS

**Please direct my gift to the following:**

- Endowed Scholarship
- General Endowment
- Unrestricted
- Departmental Endowment (select from the following):
  - Anesthesiology
  - Biomedical Sciences
  - Emergency Medicine
  - Family & Community Medicine
  - Medical Education
  - Medical Library
  - Medicine
  - Nursing and Clinical Support Services
  - Obstetrics & Gynecology
  - Orthopaedic Surgery
  - Pathology
  - Pediatric & Adolescent Medicine
  - Psychiatry
  - Radiology
  - Research
  - Simulation Center
  - Surgery
- No preference

**Name to be recognized:**

- In honor of       In memory of

- Enclosed is a matching gift form from my and/or spouse's employer.
- Please send information on how to include WMed in my estate plan.
- I wish to remain anonymous in all donor listings.

**Learn more about the opportunities of giving:**

*Al Shifflett III at 269.337.4483 or [al.shifflett@med.wmich.edu](mailto:al.shifflett@med.wmich.edu)*

[med.wmich.edu/giving](https://med.wmich.edu/giving)