



Monthly Giving Program

Through the Monthly Giving program, you can easily make your gift to the Franklin & Marshall Fund in regular monthly installments from your credit card or checking/savings account.

Your monthly contribution provides the College with an on-going, reliable source of funding. Gifts made through this program reduce our administrative costs and allow more of your gift to be used immediately to support Franklin & Marshall's top priority: expanding opportunities for students and faculty.

Enrolling in the program means you won't have to worry about writing and sending a check and will also decrease the number of phone and mail reminders you receive from the College. A record of each gift will appear on your bank or credit card statements and you will receive an annual receipt from the College in January. If you choose to allow deductions to continue from year to year, you will be counted among F&M's most loyal and valued donors and be recognized for your participation in the Report of Gifts.

The program may also allow you to increase your yearly contribution to a leadership level because your gift is divided into manageable monthly increments. Please consider joining The Benjamin Franklin Society at the following levels. Monthly amounts may need to be adjusted during the first year if enrollment begins after July to ensure the desired giving level is achieved.

Giving Level	Monthly Contribution	Yearly Amount
1787 Council	\$148.92	\$1,787
Distler Council	\$208.34	\$2,500
Hartman Council	\$416.67	\$5,000
Goethean Council	\$833.34	\$10,000
Diagnothian Council	\$2,083.34	\$25,000
Old Main Council	\$4,166.67	\$50,000

Graduation Date	Monthly Contribution	Yearly Amount
1 year ago	\$8.34	\$100
2 years ago	\$16.67	\$200
3 years ago	\$25.00	\$300
4 years ago	\$33.34	\$400
5 th Reunion	\$41.67	\$500
6 years ago	\$50.00	\$600
7 years ago	\$58.34	\$700
8 years ago	\$66.67	\$800
9 years ago	\$75.00	\$900
10 th Reunion	\$83.34	\$1,000

To enroll in the Franklin & Marshall Fund Monthly Giving Program, please complete the attached form and return to **Attn: Danielle Vigilante Webb, Assistant Director of Annual Giving** by mail to: Franklin & Marshall College Advancement – PO Box 3003 – Lancaster, PA 17604 or by fax to: (717) 358-4416.

If you have questions or would like to increase, decrease or terminate your monthly giving, please call (717) 291-4330 or e-mail gift.accounting@fandm.edu. Please remember to contact the College when you close accounts, change banks or get an updated expiration date for your credit card.

Complete the attached enrollment form and guarantee your support for F&M every year!



Monthly Giving Enrollment Form

Your Name(s) _____ Class Year (if applicable) _____

Street Address _____

City _____ State _____ Zip Code _____

Daytime Phone _____ E-mail _____

I(We) would like to support the College with monthly contributions to the Franklin & Marshall Fund:

- \$ _____ **UNRESTRICTED** (College's strategic priorities)
- \$ _____ Financial Aid
- \$ _____ Academic Programs (specify department, if desired) _____
- \$ _____ Diplomat Athletic Club (specify sport, if desired) _____
- \$ _____ Other (please specify) _____

\$ _____ **Total Monthly Contribution** (\$5 minimum)

Total Yearly Contribution will depend on month of first debit. F&M's fiscal year runs from July 1 – June 30.

Please make charges on or around the 1st or 15th of the month, beginning (month/year): ____ / ____

I would like charges to occur until I provide further notice or (month/year): ____ / ____

Credit Card Option

I (We) hereby authorize Franklin & Marshall College to initiate monthly charges to my (our) credit card in the amount(s) listed above.

Type of Card: VISA Mastercard Discover American Express

Card Number _____ Expiration Date _____

Electronic Funds Transfer Option

*I (We) hereby authorize Franklin & Marshall College to initiate monthly debit entries in the amount(s) listed above, from the account at the financial institution named below, and authorize the institution to debit the below named account for the same. **Please attach a voided check or deposit slip to this form.***

Financial Institution _____ Type of account: Checking Savings

9-digit routing number* _____ Account Number _____

*can be found at the bottom of your check, directly before your account number

Signature(s) required to authorize credit card or EFT option

Signature _____	Date _____
Signature _____	Date _____

Please remember:

- Keep a copy of this form for your records.
- All monthly charges will be reflected on your statement. The College will provide you with a receipt annually in January for all gifts during the previous calendar year (January through December) for your tax records.
- **Return the signed original to attn: Danielle Vigilante Webb, Assistant Director of Annual Giving by mail to: Franklin & Marshall College Advancement – PO Box 3003 – Lancaster, PA 17604 or by fax to (717) 358-4416.**
- If you have questions or would like to increase, decrease or terminate your monthly giving, call (717) 291-4330 or e-mail gift.accounting@fandm.edu.