



LATINO/LATINA FACULTY AND STAFF ASSOCIATION
MEMBERSHIP DUES FORM
FISCAL YEAR 2018-2019

Your name _____

Campus Box _____

Staff/Faculty ID # _____

Phone Extension _____

Home Address _____

It is my desire to:

Begin a new Payroll Deduction

Change my current deduction

Cancel my current deduction

\$5 per month

\$10 per month

\$15 per month

\$20 per month

\$25 per month

*Other per month \$

The amount selected is to be deducted from my paycheck monthly until written notice from me.

For membership in the LFSA, faculty and staff with 12-month employment contracts need at least \$5/month contribution (\$60 per year), faculty and staff with 10-month employment need a \$6/month contribution (60\$ per year).

My donation is to be used for (check all that apply):

Latino Faculty Staff Association (LFSA) General Fund **HFS01**

Latino Faculty Staff Association (LFSA) Scholarship Fund **HFS51**

*You can split your total monthly gift to be distributed evenly between the two funds by selecting both boxes above.

Signature: _____

Date: _____

For tax purposes, you will receive a summary of your contribution at the end of the calendar year.

Options for submitting form:

- E-mail the signed form via MSU Denver e-mail to rjimene8@msudenver.edu
- Send via campus mail to Campus Box 40 (Keep a copy for your records)

If you have a questions about payroll deductions please e-mail **Raquel Jimenez** at rjimene8@msudenver.edu