



November 1, 2024

Dear Yellowjacket Nation,

Happy November!

I'm honored to take on the additional role this year of Director of the Annual Fund, and I'm thrilled to share some exciting changes with you for our 2024-2025 Campus Drive. This year, we want to give you the power to choose exactly **where you want** your donation to go. We've provided a general list of areas within the university that could use your support. If you don't see the area you want to help listed, please reach out and we can see what we can do to make it work.

Every contribution, no matter the size, makes a meaningful difference—give what you feel is right for you and be part of the impact. Last year, only **7** individuals participated in the campus drive: this year we want to raise that to **25**.

Just a little example of the power we have as a campus community
406 FT employees x \$5 per pay period = \$2,030 per month
\$2,030 per month x 12 months = \$48,720 per year

What does that equal?

If the donations were solely focused on scholarships, it would cover tuition for 5 students at City College or 3 students at University Campus for an entire year.

While we are committed to reducing the number of donation requests from our faculty and staff, we value and recognize the importance of your support. That's why we've made it easy for you to contribute through payroll deduction, including supporting Jacket Giving Day, or the Wine & Food Festival if you wish. Our goal is to make it as convenient as possible for you to make a difference in our campus community.

To sign up for campus drive, simply complete the attached form and return it to the MSUB Foundation Attn: Nick Schmidt. We'll gather the necessary information and return it to HR to officially start your donation.

If you have any questions or need further information, please feel free to contact me. Your consideration and support mean a lot to us.

Thank you & Go Jackets!

Nick Schmidt

Director of Annual Giving & Assistant AD - Athletics Advancement

Montana State University Billings Foundation & Alumni
1500 University Drive | Billings, MT 59101 | 406-657-2244 | msubfoundation.com

What to support

- Can we count on you to reach our goal of 25 Campus Drive participants?

General Campus Support

- General Scholarship Support (3920)
- MSUB Excellence Fund (0000)
- Yellowjacket Excellence Scholarship (4313)
- Finish Line Scholarship (3720)
- Chancellor Excellence Award (6240)
- General Athletic Scholarship (3190)
- Yellowjacket Student Crisis Fund (2973)

College/Department Specific Support

- | | |
|---|---|
| <ul style="list-style-type: none">• CLASS<ul style="list-style-type: none">- Dean's Fund (2760) | <ul style="list-style-type: none">• COE<ul style="list-style-type: none">- Dean's Fund (2840) |
| <ul style="list-style-type: none">• COB<ul style="list-style-type: none">- Dean's Fund (2790) | <ul style="list-style-type: none">• City College<ul style="list-style-type: none">- Dean's Fund (3400) |
| <ul style="list-style-type: none">• CHPS<ul style="list-style-type: none">- Dean's Fund (2700) | <ul style="list-style-type: none">• Athletics<ul style="list-style-type: none">- Yellowjacket Athletic Excellence Fund (2900)- General Athletic Scholarship (3190) |

Success

Don't see the fund you want to support?

List the fund(s) you would like to support through payroll deduction on the attached form.

2024 Campus Drive

Scan the QR code to fill out digitally



DONOR INFORMATION

First Name: _____ Last Name: _____

Address: _____

Campus Address: _____

City/State/Zip: _____

Email Address: _____

Phone Number: _____

I would like the gift to remain anonymous

GIFT DESIGNATION

Amount	Fund Name	Fund Number

If other, please tell us where you would like to direct your donation (if not identified, donation will be put to MSUB Greatest Needs): _____

PAYMENT INFORMATION

Payroll Deduction - please deduct the following amount per pay period:

- \$19.27 in honor of MSUB's founding year
- \$_____ in honor of my graduation year
- \$_____

Frequency: 1 year (ends June 30, 2025) Until further notice

Deduction start date: _____

I understand I must give the payroll office 30 days notice to change this authorization

Signature: _____ Date: _____