

**Payroll Deduction Authorization**

Name *(please print)*: \_\_\_\_\_ Employee ID: \_\_\_\_\_

<b>Donation Details</b>	
<b>Annual Fund:</b>	\$ _____
<b>Other designation:</b>	\$ _____ [Fund name: _____]
<b>Other designation:</b>	\$ _____ [Fund name: _____]
<b>Total:</b>	\$ _____
<b>Pay Period Details</b>	
Total amount per pay period:    Number of pay periods (usually 24):	
\$ _____	_____