

## Employee Payroll Deduction Form for the Missouri State Foundation

*(For deductions for a minimum of 9 months)*

(Please print, complete and return to Assistant Director of Advancement Services, Office of Development and Alumni Relations.)

Name: \_\_\_\_\_

Employee M#: \_\_\_\_\_

Home Address and Telephone #: \_\_\_\_\_

Campus Dept./Office and Telephone #: \_\_\_\_\_

I. Please check ONE of the boxes below relating to the information to be filled out in Section II of this form:

\_\_\_\_\_ The deduction detailed in Section II is a new contribution to the Missouri State Foundation and currently my only gift being made through the payroll deduction plan.

\_\_\_\_\_ I currently have a payroll deduction to the Missouri State Foundation each month. Please continue this deduction per the original paperwork I filled out regarding this gift.

\_\_\_\_\_ I currently have a payroll deduction to the Missouri State Foundation each month. Please discontinue this contribution at this time.

\_\_\_\_\_ I currently have a payroll deduction to the Missouri State Foundation that I wish to change at this time. I have filled out the information in Section II to reflect such changes in the amount and/or designation of my current deduction so that the information listed below reflects the TOTAL DOLLAR AMOUNT I WISH TO HAVE DEDUCTED FROM MY CHECK EACH MONTH AS A GIFT TO THE MISSOURI STATE FOUNDATION.

II. I would like to make a monthly gift to the Missouri State Foundation through payroll deduction in the amount of \$\_\_\_\_\_ per month beginning with my \_\_\_\_\_ (indicate month and year) paycheck and ending with my \_\_\_\_\_ paycheck. This gift should be designated for (indicate account/area) \_\_\_\_\_.

If you do not indicate in Section II a month and year for beginning and/or ending this deduction, your gift will begin in the next pay period following receipt of this form and will continue until you inform Payroll in writing that you wish this deduction to cease.

If you are splitting your monthly gift between more than one area of designation, please clearly delineate in Section II the dollar portion of your total gift which goes to each account/area each month.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_