

PAYROLL DEDUCTION AUTHORIZATION FOR GIFTS TO LAB

- 1. Please complete this form and send to:
 - a. Alumni Relations & Development in Belfield West, N104
 - b. OR Scan and email to development@ucls.uchicago.edu
- 2. Lab ARD will forward the form to University payroll to begin deductions.

 Questions can be directed to John Damer at 773-702-0578

YOUR INFORMATION

Name:		
Employee ID or Chicago ID#:		
Department & Location:		
Office Phone:		
Pay Frequency:	Bi-weekly	
GIFT INFORMATION		
Total Gift Amount (Grand total to be deduct	ed annually): \$	
Deduction Amount per Pay Period*: \$ *Must be equal amounts each pay period		
Deduction Start Date:	& End Date:	
Gift Designation (Annual Fund, Financial A	id, etc.):	
	Percent of Deduction	%
	Percent of Deduction	%
Signature:	Date:	