FOR ACCOUNTING SERVICES USE ONLY
Employee _____
1ST 4 Letters of Name _____
Deduct Code: _____ """""""""""""""""""""""""""""""""""
""
"

THIS COMPLETED FORM MUST BE RETURNED TO
UNIVERSITY ADVANCEMENT FOR PROCESSING
Homer L. Hitt Alumni & Visitors Center
""Wpkxgtukv{ qh Pgy Qtngcpu
4222 Ncmguj qtg Ftkxg
Pgy Qtngcpu Nqwukcpc 9236:

THE UNIVERSITY *of* NEW ORLEANS

PAYROLL DEDUCTION FORM
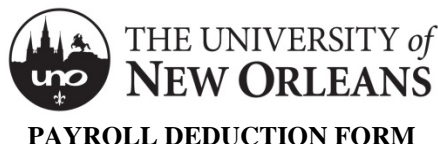
I authorize the University of New Orleans Payroll Department to begin a payroll deduction as indicated below:

[CHOOSE ONE] _____ one-time deduction of $_____

_____ twice a month deduction of $_____ per pay period (Fiscal/Academic)

_____ bi-weekly deduction of $_____ per pay period (Civil Service/Biweekly Payroll)

Designate the account (such as UNO First Fund, College, Department or Program) and the amount of your pledge to each:

COLLEGE/DEPARTMENT/PROGRAM/ACCOUNT	AMOUNT PER PAY PERIOD
_____	$_____
_____	$_____
_____	$_____

This payroll deduction will terminate when:

[CHOOSE ONE] the total of $_____ is reached, or

the University of New Orleans is otherwise notified by the employee.

I would like my payroll deduction plan to become effective _____
Month/Year

I understand the UNO Foundation will book my pledge to the designated accounts upon receipt of the completed Payroll Deduction Form. Upon receipt of funds from the UNO Payroll Office, the UNO Foundation will credit payments to the appropriate Foundation project account as designated above.

_____   _____   _____
Print or type name   Employee #   Department

_____   _____   _____
Signature   Telephone #   Date

_____   _____   _____
Signature of UNO Foundation Staff   Telephone #   Date

03/01/2013