

Payroll Deduction Form

Donor Information

Panther ID

Name (First, MI, Last)

Department Name

Campus P.O. Box

E-mail Address

Phone Number

Donation Information

Please deduct from my salary the amount of \$_____ per pay period beginning (MM/YY) _____.

I authorize this payroll deduction.

Please note that some faculty members are on a 10-month contract and can only have 10 deductions per year.

All payroll deductions are continuous with no end date unless otherwise noted by the donor.

Changes may be made at any time during the year.

Signature _____

Original Signature Required

Today's Date

Designation Information

I would like to designate my gift to:

*Gifts to the **Georgia State University Foundation** are tax-deductible to the extent allowed by law.*

\$	GSU Fund for Excellence
\$	College:
\$	Rialto Center for the Arts
\$	GSU Fund for the University Library
\$	University-wide Scholarships
\$	Athletics (Panther Athletic Club)
\$	Other (please specify)
\$	Total Amount

Thank You for Your Generous Support!

Questions? Contact us at 404-413-3446

Please print and return this form to

Georgia State University Foundation

on campus to • P.O. Box 3963 • Atlanta, Georgia, 30302-3963

or in person at • One Park Place, Suite 533

or via email to • mcampbell11@gsu.edu

FOR FOUNDATION USE ONLY

Date Received:	
Date Processed:	
Date Sent to HR:	
OLCCPD	