

TO: UW-Whitewater Faculty/Staff & Classified Employees

Anyone wishing to contribute to the UW-Whitewater Foundation, Inc. may do so through payroll deductions. Please complete the form below and **return to Kris Fantetti, UW-Whitewater Foundation, Alumni Center.**

Richard Telfer  
Chancellor

To: UW-Whitewater Foundation, Inc.  
Alumni Center, UW-Whitewater

EMPLOYEE NAME \_\_\_\_\_  
(Please Print Full Name Clearly)

OFFICE/DEPT LOCATION \_\_\_\_\_ OFFICE PHONE \_\_\_\_\_

Authorization is hereby granted to the payroll office to deduct \$ \_\_\_\_\_ from each paycheck beginning with the check issued \_\_\_\_\_.

Month Day Year

**New Requests** - Please designate the fund(s) and contribution(s) amounts below:

Fund Name	Monthly Contribution
	\$
	\$
	\$
	\$

**Option 1)** Please stop my deduction when the total amount contributed equals \$ \_\_\_\_\_

**Option 2)** I prefer an ongoing monthly deduction of \$ \_\_\_\_\_ until I notify the Foundation to end or change it.

\_\_\_\_\_ Check here if you are on a 9-month contract and do not want this deduction taken out of any summer pay.

**If you have a current payroll deduction you are changing, please complete the following:**

I am currently having \$ \_\_\_\_\_ deducted from each check. I would like to change this to \$ \_\_\_\_\_ per check. This makes my total payroll deduction to the Foundation \$ \_\_\_\_\_. Please designate the fund(s) and monthly contribution to the fund(s):

Fund Name	Monthly Contribution
	\$
	\$
	\$
	\$

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

If you chose Option 1 above your deduction will automatically end when the total amount pledged is paid in full. If you chose Option 2 above and decide to end your participation in payroll deduction, please contact Kris Fantetti, University Foundation, 472-1108.

**Please print a copy for your records**