

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

THIS COMPLETED FORM MUST BE RETURNED TO
UNO FOUNDATION ADVANCEMENT SERVICES
HOMER L. HITT ALUMNI & VISITORS CENTER
FOR PROCESSING

**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