



## FLORIDA STATE UNIVERSITY PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize the **FSU Payroll Office** to deduct the following as my gift to Florida State University.

### INDIVIDUAL INFORMATION

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Preferred email: \_\_\_\_\_

SSN# (last four digits) or EMPLID: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Joint gift with: \_\_\_\_\_

Relationship:  Spouse  Life Partner

### WHAT TYPE OF DONATION WOULD YOU LIKE TO MAKE?

*(Please check and complete one of the options below. If neither option is checked, the default option is "ongoing" until canceled by employee. Please contact the FSU Foundation to cancel the deduction.)*

Please begin my deduction in (month/year): \_\_\_\_\_

**PLEDGE**

- 1.) Please deduct \$ \_\_\_\_\_ (amount) per pay period.
- 2.) Please continue until my pledge of \$ \_\_\_\_\_ (amount) is complete.

**ONGOING UNTIL I CANCEL**

- 1.) Please deduct \$ \_\_\_\_\_ (amount) per pay period.

### CHANGE IN PAYROLL DEDUCTION

*(This section applies only if you have a gift currently being deducted from your pay.)*

- Continue my previous deduction(s) in addition to this request.
- Cancel my previous deduction(s) and replace with this request.

### GIFT DESIGNATION

I wish my gift to be used for:

- FSU's greatest needs
- or

Specific area of interest: \_\_\_\_\_

*(For multiple designations, indicate the amount pledged to each designation.)*

#### For FSU Foundation Internal Use Only

|        |          |        |          |        |          |
|--------|----------|--------|----------|--------|----------|
| FNDEU  | \$ _____ | FND3LM | \$ _____ | FND6LM | \$ _____ |
| FND1LM | \$ _____ | FND4LM | \$ _____ | FND7LM | \$ _____ |
| FND2LM | \$ _____ | FND5LM | \$ _____ |        |          |

\* Above represents code for new deduction in addition to any previous deductions.