



PAYROLL DEDUCTION AUTHORIZATION FORM

Name _____ UO ID _____
Department _____ Title _____
Home Address _____ City _____ State _____ Zip _____
E-mail _____ Home Phone _____ Cell Phone _____

Faculty Staff Are you also? Alumnus: Class Year _____ Degree _____ Parent

PLEASE CHECK ONE OF THE
OPTIONS BELOW:

I want to...

- INITIATE
- CHANGE*
- ADD A NEW GIFT
- CANCEL

my payroll deduction to UO.

GIFT #1

I want to give \$ _____ per month to _____
(amount) *(designation)*

- This is an ONGOING payroll deduction until I cancel my gift in writing or leave the university.
- This is a LIMITED payroll deduction until my total pledge of \$ _____ is fulfilled.
(amount)

GIFT #2

I want to give \$ _____ per month to _____
(amount) *(designation)*

- This is an ONGOING payroll deduction until I cancel my gift in writing or leave the university.
- This is a LIMITED payroll deduction until my total pledge of \$ _____ is fulfilled.
(amount)

I understand my gift by payroll deduction will remain in effect until I cancel my gift in writing, my pledge is paid in full, or until I leave the university. I also understand that initiating, changing, adding or cancelling my payroll deduction will be effective on the first day of the month following receipt of this form, subject to cutoff dates from the UO Payroll Office. Further, I understand that I will receive one annual gift receipt from the University of Oregon Foundation detailing my giving by payroll deduction for the entire year.

Signature _____ Date _____

Please send your completed and signed form to:

Donelle Manton
Annual Giving Program
Ford Alumni Center
1720 E. 13th Avenue, Suite 312
Eugene, OR 97403

Questions? Call 541-346-2114 or email
dmanton@uoregon.edu

* PLEASE NOTE: Checking this box will override and replace any existing payroll deductions already authorized by you.