

Start Date

Internal Use

University of Missouri Authorization For Payroll Deduction

Element No.

Internal Use

Active Employee

Retired

Empl ID

Department

Name (Last, First, Middle)

Mailing Address

Deduction is:

New

Change

Cancel

Monthly Payroll (from my paycheck each month)

Bi-weekly Payroll (from the first two checks of each month)

I hereby authorize you to deduct \$ _____ from my paycheck

Check one:

Until further notice.

Until total deduction of \$ _____ has been met.

I would like my donation to go to. _____

Signature _____

Effective Date _____