

## Daytona State College Foundation | Employee Giving Campaign | Payroll Deduction Authorization Form

\_\_\_\_\_  
Employee Name (Print)

\_\_\_\_\_  
ID#

I authorize the Daytona State College Payroll Department to make the following deduction from my earnings each payroll period and remit same to the Daytona State College Foundation, Inc., until otherwise notified by me in writing to the Payroll Office.

**(If you would like to continue your existing payroll deduction, no action is necessary.)**

I wish my contribution to be utilized in the following areas: (Check all that apply:)

- Alumni & Friends
  Foundation General Scholarship  
 Athletics (please designate sport) \_\_\_\_\_  
 Constituent Groups (please designate group) \_\_\_\_\_  
 Other \_\_\_\_\_

Please list specific name of scholarship or area of study to be supported.

**Contact Judy at [judy.haydt@daytonastate.edu](mailto:judy.haydt@daytonastate.edu) x3110 for help finding a fund tailored to your interests.**

Amount to be deducted:

- \$50.00   
  \$25.00   
  \$15.00   
  \$10.00   
  \$5.00   
  \$2.00  
 Other amount \$\_\_\_\_\_   
  One-time \$20.23 donation in support of the 2023 Employee Giving Campaign

Please complete all that apply:

- Donation is in addition to: (name of fund/dollar amount) \_\_\_\_\_
- Donation is in place of: (name of fund/dollar amount) \_\_\_\_\_
- Increase current donation: from \$\_\_\_\_\_ to \$\_\_\_\_\_

\_\_\_\_\_  
EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

Please return form via (a) interoffice mail, (b) e-mail to [foundation@daytonastate.edu](mailto:foundation@daytonastate.edu) or (c) drop off to:  
Daytona State College Foundation, Wetherell Center (Bldg. 100) Rm. 302.