

**EMPLOYEE SIGNATURE** 



## Daytona State College Foundation | | Employee Giving Campaign | Payroll Deduction Authorization Form TO: DAYTONA STATE COLLEGE FOUNDATION FROM: Employee Name (Print) I hereby authorize Daytona State College Payroll Department to make the following deduction from my earnings each payroll date 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, at the same 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 x3110 for help finding a fund tailored to your interests. Amount to be deducted: □ \$50.00 \$25.00 \$20.00 ☐ \$15.00 □ \$10.00 □ \$ 5.00 ☐ Other amount \$\_\_\_\_ ☐ One-time \$20.21 donation in support of the 2021 Employee Giving Campaign Please complete all that apply: New employee donation is in place of: (name of fund/dollar amount) Increase current donation: from \$\_\_\_\_\_\_ to \$\_\_\_\_

Please return form via interoffice mail or drop off to: Daytona State College Foundation, Wetherell Center (Bldg. 100) Rm. 302. Attn: Judy Haydt

DATE