

Employee Payroll Contribution Form

CAMPUS DESIGNATION

Designate to the following campus:					
DEDUCTION TYPE					
	Deduct an amount equal to% of my gross salary until I revise this authorization in writing.				
	Deduct	% of my salary until \$	has bee	en contributed.	
	Deduct \$	per pay period until I rev	period until I revise this authorization in writing.		
			od until \$ has been contributed.		
		per pay period until y _	·	nus seem commuteu.	
AREA OF SUPPORT					
	Area of greatest need				
	Emergency Aid				
	Scholarships (Specify)				
	Department/Program (Specify)				
	Other (Specify)				
THIS CONTRIBUTION IS ONE OF THE FOLLOWING:					
	in addition to my current deduction Stop payroll deduction			op payroll deduction	
	replaces my current deduction				
	new payroll deduction				
Name		C#			
Mailin	g Street or PO B	Вох			
City		State	Zip		
Phone		Email			
Signature			Date		
☐ PI	lease contact me about placing Ivy Tech in		DEVELOPMENT OFFICE INTERNAL USE ONLY		
my will, trust, or other estate plans.		Fund#	Deduction Amount:		
Questions: gifts@ivvtech.edu.or.nhone 317-921-4341				Deduction Amount:	