

The University of Texas at San Antonio

PAYROLL DEDUCTION GIFT FORM

Submit to the Development Office, JPL 4.02.08. If you have any questions, call ext. 5135.

PLEASE PRINT CLEARLY

Donor Name: _____

Donor SSN: _____

Department/Office: _____

Home Address: _____

Title: _____

Work Phone: _____

Home Phone: _____

Work Email: _____

Home Email: _____

I am (Check all that apply): Faculty Staff Alumnus

PAYROLL DEDUCTION: Amount of gift each month \$ _ _ _ for a total annual deduction of \$ _____.

Designation: _____

Please provide account number if known.

I hereby authorize The University of Texas at San Antonio to deduct from my paycheck each month the amount indicated above.

Donor Signature: _____ Date _____

NOTE: Automatic monthly gift deduction will remain in effect until revoked in writing to the Development Office by the employee.

An annual statement of your gifts will be automatically provided to you in January for tax purposes.

Your contribution is tax deductible to the extent allowed by law. Please consult with your tax advisor for further information.

For Development Office Use Only

Original must be forwarded to Payroll Office with a copy retained for processing purposes.

Date Received: _____