

Authorization for Payroll Deduction

I have decided to make a gift using the UNCP payroll deduction plan. I would like to designate my gift to:

_____.

Option One:

The total amount of this gift is \$_____. This gift will be provided over a period of_____ months at \$_____ per month beginning _____ and ending _____.

Option Two:

This monthly gift will be provided indefinitely at \$_____ per month beginning _____ for a total annual gift of \$_____ and a total gift amount of \$_____ (calculating using 10 years). After a period of ten years, you will be contacted to determine if you choose to continue this pledge.

I hereby authorize The University of North Carolina at Pembroke to deduct from my wages the monthly amount shown and to make monthly payments of this amount to the UNCP Foundation, Inc.

Print Full Name:

Banner#:

Date:

Signature:



Please print the Payroll Deduction Form above and return it to the UNCP Alumni Relations Office, Lumbee Hall Room 441.

You may also mail it to:

Alumni Relations Office, UNCP, P.O. Box 1510, Pembroke, NC 28372.

If you have questions, you may call 910-521-6533.