

**CHARITABLE GIFT  
PAYROLL DEDUCTION AUTHORIZATION FORM**

For Office Use Only:
ID# _____
Source _____
Alloc _____
Pledge _____
Date sent to H/R _____

Last Name	First	MI	Employee ID
Street Address		City, State	Zip Code
Phone: (home) _____		(work) _____	

● Please Check One (or more):

\$ \_\_\_\_\_ / paycheck **New Deduction**

\$ \_\_\_\_\_ / paycheck **Change in Deduction**

**Delete Payroll Deduction**

**Effective Date** \_\_\_\_\_

● Please Use My Contribution:

Area or Program \_\_\_\_\_

Scholarship Program \_\_\_\_\_

Where Need is Greatest

Other \_\_\_\_\_

**STATE EMPLOYEES:** I authorize the State Controller to deduct each month from my salaries and wages as specified. This authorization will remain in effect until canceled by me or by California Polytechnic State University, San Luis Obispo. I certify that I am an employee of California Polytechnic State University, San Luis Obispo, and I understand that termination of membership will cancel all deductions made under this authorization.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CAL POLY CORPORATION EMPLOYEES:** I authorize the Cal Poly Corporation to deduct bi-weekly (the first two paydays of each month) as specified. This authorization will remain in effect until canceled by me or by Cal Poly Corporation, San Luis Obispo.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*One tax receipt will be issued at calendar year-end.\*\***

Sample payroll deductions for annual membership in the Cal Poly Annual Gift Clubs are as follows:

To join the following support group ...	For an annual contribution of ...	Your minimum monthly deduction is ...	Your minimum bi-weekly deduction is ...
<input type="checkbox"/> President's Round Table	(\$5,000 or more)	\$417.00	\$208.50
<input type="checkbox"/> Cal Poly Centennial Society	(\$2,000-\$4,999)	\$167.00	\$83.50
<input type="checkbox"/> Partners in Excellence	(\$1,000-\$1,999)	\$84.00	\$42.00
<input type="checkbox"/> Cal Poly Friends	(\$60-\$999)	\$5.00	\$2.50

\*Payroll deduction minimum is \$5.00 per month. The deduction will be in effect until the employee requests, in writing, it be discontinued. **Please return form to Advancement Services, Heron Hall Rm. 109, or call 756-1555 if you have questions.**