

Payroll Deduction Form

Please accept my gift of \$_____ annually to the University through payroll deduction beginning ______

- D Please accept my gift in support of the **Annual Fund** (University's most pressing needs).
- Please accept my gift in support of ______

Please deduct my gift from my wages according to the following schedule (must pick one):

\$_____ per month OR \$_____ semi-monthly OR \$_____ bi-weekly See reverse for a helpful break down of calculations.

Signature:		Date:		
Name:				
Address:				
City:	State:	Zip:		
Phone:	Email:			

* I understand that this is an ongoing payroll deduction. However, I reserve the right to discontinue this deduction at any time.

I also realize that it typically takes two weeks before my deduction will appear/be processed for the first time.

Please return this card to the Development Department (1100 Grace Hall) indicating any address changes with your gift.

Annual	Deductions			
Contribution	Bi-weekly	Semi-monthly	Monthly	
\$100*	\$3.85	\$4.17	\$8.33	
\$200	\$7.69	\$8.33	\$16.67	
\$1,000	\$38.46	\$41.67	\$83.33	
\$1,500	\$57.69	\$62.50	\$125.00	
\$3,000	\$115.38	\$125.00	\$250.00	
\$5,000	\$192.31	\$208.33	\$416.67	
\$10,000	\$384.62	\$416.67	\$833.33	

* Minimum gift allowed through payroll deduction

For more information, please visit **supporting.nd.edu**.

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