Print Form

The University of Texas at Dallas

PAYROLL DEDUCTION GIFT FORM

Complete form on your computer, then print and submit to Office of Development and Alumni Relations, SPN 2.102, SPN10.
If you have questions, call ext. 2295.

Donor Name: _____ UTD ID: _____

Department/Office: _____ Home Address: _____

Title: _____ _____

Work Phone: _____ Home Phone: _____

Work Email: _____ Home Email: _____

I am (check all that apply): ☐ Faculty ☐ Staff ☐ Alumni

I want to contribute: $ _____ X _____ = my total gift $ _____ .
Amount Per Pay # of Pay Periods

Designate my gift to: _____

Begin my payroll deduction on this date: _____

I hereby authorize The University of Texas at Dallas to deduct from my paycheck each pay period the amount indicated above.

Donor Signature: _____ Date: _____

NOTE:

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

For Office of Development and Alumni Relations Use Only

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

Date Received: _____