

Payroll Deduction Form

Employee Name _____

College/Department/Program _____ Faculty Staff

Part 1: Choose the frequency of your payroll deduction (please choose only one).

- Please deduct \$ _____ per paycheck, until further notice.
- Please deduct \$ _____ per paycheck for _____ months, or until balance (\$ _____) is reached.
- Please deduct _____ percent per paycheck (after taxes), until further notice.
- I would like to make a one-time contribution. Please deduct \$ _____ from my next paycheck.

I am paid monthly bi-weekly. Please begin payroll deduction on: _____ (month)/ _____ (year).

Part 2: Choose an allocation for your gift.

You may direct your support to any area of the university. Support may be applied to more than one area—if not designated, your gift will be applied to the Marian Fund for supporting area of greatest need:

Percent _____ or \$ _____ Support scholarships (annual and endowed)

Percent _____ or \$ _____ Enhance facilities

Percent _____ or \$ _____ Sisters' Legacy Fund

Percent _____ or \$ _____ Give to another designated fund or department. Please specify. _____

Your annual gift of:

- \$25 _____ is only \$2.08 per month
- \$50 _____ is only \$4.17 per month
- \$100 _____ is only \$8.33 per month
- \$500 _____ is only \$41.67 per month
- \$1,000 _____ is only \$83.33 per month

**This is a partial representation of where your support may be directed.*

Part 3: Sign form and send to the Office of Institutional Advancement.

I hereby authorize the Office of Human Resources to deduct from my paycheck the amount specified now or in the future for philanthropic gifts for which I have agreed. You may choose to end your payroll deduction at any time by sending written notification to the Office of Human Resources. If you leave Marian University, your payroll deduction agreement will be automatically canceled at that time.

I understand that Marian University will hold, manage, invest, reinvest, and administer my gift in accordance with its governing instruments and the laws of the State of Indiana. Marian University may commit or expend all or a portion of the gift for the support of Marian and its programs in such a manner and at such times as the Board of Trustees in its sole discretion deems fit. This agreement may be amended only by written instrument signed by all parties to this agreement. No representation, statement, condition, or warranty not contained in this agreement will be binding on Marian University or me or have any force or effect whatsoever.

EMPLOYEE SIGNATURE _____

Please mark if applicable: I do not wish to have my name printed in the President's Report.

Payroll deduction contributions may be tax-deductible. Please consult your tax advisor. Gift acknowledgements will be provided for tax purposes. A tax statement will be provided in January each year for all gifts made the previous year.

If you wish to cancel or change your current payroll deduction agreement or if you need additional information, please contact the Office of Institutional Advancement at 317.955.6738 or advancement@marian.edu.