

# Plattsburgh

STATE UNIVERSITY OF NEW YORK

## PAYROLL DEDUCTION AUTHORIZATION

Please return this form to the Plattsburgh College Foundation, Inc.  
Hawkins Hall 107, 101 Broad Street, Plattsburgh, NY 12901

Name: \_\_\_\_\_

Faculty     Staff    Other: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Net ID or Username: \_\_\_\_\_

Email: \_\_\_\_\_

Please check below to authorize the Plattsburgh College Foundation, Inc. (Fund Code 835) to:

Deduct \$ \_\_\_\_\_ each pay period until the Foundation is notified in writing of a change.\*

Deduct \$ \_\_\_\_\_ each pay period until your total gift is \$ \_\_\_\_\_.

Deduct \$ \_\_\_\_\_ ONE TIME, from your next paycheck.

*\* If you are already using payroll deduction and wish to change the amount that you are giving, please mark the new total amount to be deducted from your check.*

Please let us know how to direct your support. If you choose more than one fund, please indicate how you would like your gift to be allocated:

\$ \_\_\_\_\_ The Plattsburgh Fund (Unrestricted Support)  
\$ \_\_\_\_\_ Unrestricted Endowment  
\$ \_\_\_\_\_ Unrestricted Scholarship  
\$ \_\_\_\_\_ Endowed Scholarship  
\$ \_\_\_\_\_ **Faculty/Staff Fund**  
\$ \_\_\_\_\_ Other - department, program or existing named scholarship: \_\_\_\_\_

If you are already making payroll contributions, and this form reflects a change, please check one of the following boxes to inform us of your intent:

- The amount marked above is a change in the amount my current contribution.
- The amount marked above is a change to the designation of my current contribution.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you would like to make a gift by check or credit card, please call the Foundation at 518-564-2090 or go to [www.plattsburgh.edu/makeagift](http://www.plattsburgh.edu/makeagift).