



# PAYROLL DEDUCTION AUTHORIZATION FORM

YES! I want to help Mansfield students through a pledge to the Mansfield University Foundation.  
I hereby authorize Mansfield University to take deductions from my bi-weekly pay.

\_\_\_\_\_  
Employee Name (Last, First)

\_\_\_\_\_  
Social Security Number

Please begin my deduction on \_\_\_\_\_ Please stop my deduction on \_\_\_\_\_

**New Contribution:** I want my contribution as follows:

1 % of my pay to go The Mansfield Way Scholarship Fund ..... \$ \_\_\_\_\_

Unrestricted, where the organization has the greatest need ..... \$ \_\_\_\_\_

Fund of my choice.  
Examples include: named scholarships, academic departments, athletic team, etc.

\_\_\_\_\_ \$ \_\_\_\_\_  
(Name of Fund)

\_\_\_\_\_ \$ \_\_\_\_\_  
(Name of Fund)

**Total Bi-Weekly Deduction** \$ \_\_\_\_\_

**Additional Contribution :** I want to add a contribution as follows:

1 % of my pay to go The Mansfield Way Scholarship Fund ..... \$ \_\_\_\_\_

Unrestricted, where the organization has the greatest need ..... \$ \_\_\_\_\_

Fund of my choice.  
Examples include: named scholarships, academic departments, athletic team, etc.

\_\_\_\_\_ \$ \_\_\_\_\_  
(Name of Fund)

\_\_\_\_\_ \$ \_\_\_\_\_  
(Name of Fund)

**Total Bi-Weekly Deduction** \$ \_\_\_\_\_

**Changes:**

o I want to Change my Contribution Amount as follows:

From \$ \_\_\_\_\_ to \$ \_\_\_\_\_ = **Total Bi-Weekly Deduction** \$ \_\_\_\_\_

o I want to Change my Designation of Contribution as follows:

From \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
**Employee Signature**

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

I would like more information on establishing a named endowment.

**PAYROLL USE ONLY**

Effective with Pay Date of: \_\_\_\_\_

Payroll Office  
Mansfield University  
Mansfield PA 16933