

**Stephens College
Faculty/Staff Gift Deduction Agreement**

Name

Social Security Number

Please reduce my regular salary by the amount indicated below to be donated to Stephens College as a gift. This amount will be deducted after-tax.

Please fill in the blank with the dollar amount you want withheld from **each paycheck** beginning on _____ (payroll date).

\$ _____

Please indicate on the line below if you would like the gift to be used for a specific project.

If you would like to cancel this deduction, please notify Human Resources at x4172 and they will send you the appropriate form.

Employee Signature

Date