



OFFICE OF INSTITUTIONAL ADVANCEMENT AND ALUMNI RELATIONS
REGIS FACULTY AND STAFF VOLUNTARY PAYROLL DEDUCTION

Name: _____ Phone: _____

Regis Voluntary Payroll Deduction Form: This form is specifically for the *Let It Shine Gala 2017* it will be in addition to any current payroll deduction. If you are purchasing an individual ticket for the gala, \$335 of the \$500 ticket price is tax-deductible.

For Regis Fund payroll deductions, please use this form:

https://alumni.regiscollege.edu/file/documents/annualfund_pay_deduct_updated.pdf

Authorization Agreement

Yes, I wish to support the 2017 Let It Shine Gala through voluntary payroll deduction. I understand that my gift to Regis will be deducted from my post-tax earnings. I also understand that for my tax reporting purposes I will receive a formal printed gift receipt from the university's Institutional Advancement and Alumni Relations office after the close of the calendar year acknowledging my giving through the payroll deduction plan.

Fiscal Year Donation

☐ Individual Ticket ☐ Donation

☐ **Faculty Payroll:** Please have my payroll deduction **totaling** \$ _____ begin on _____ (start date e.g. Nov. 1, 2017). I understand that \$ _____ will be deducted from **each paycheck** (post-tax) monthly for _____ pay periods. *NOTE: This pledge **must** be completed within the fiscal year ending 6/30/18 pay schedule.*

OR

☐ **Staff Payroll:** Please have my payroll deduction **totaling** \$ _____ begin on or near _____ (date). I understand that \$ _____ will be deducted from **each paycheck** (post-tax) bi-weekly for _____ pay periods. *NOTE: This pledge **must** be completed within the fiscal year ending 6/30/18 pay schedule.*

Signature

Employee Signature: _____ Date: _____