



IT'S MY MIZZOU
Faculty & Staff Campaign

PAYROLL DEDUCTION REQUEST

Employee Name (last, first, middle): _____

People Soft Employee ID: _____

Department: _____ If retired, please check box:

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Daytime Phone: _____ Email: _____

Giving Designations:		MoCode (if known)
\$ _____	Designation: _____	_____
\$ _____	Designation: _____	_____
\$ _____	Designation: _____	_____
\$ _____	Designation: _____	_____

I hereby authorize \$ _____ be deducted from each of my paychecks and contributed to the University of Missouri – Columbia as designated above:

- until (date) _____ (minimum three month contribution)
- until further notice
- until total pledge of \$ _____ has been paid
- I wish this gift to qualify me toward Sustaining Membership in the Jefferson Club.

Please check one of the following:

- I am a new payroll donor.
- This is in addition to a current deduction.
- This replaces current deductions

Signature: _____ Effective Date: _____

Comments: _____

Please send form to:
Mizzou Gift Processing
109 Reynolds Alumni Center
Columbia, MO 65211
573-882-0274
giving.missouri.edu