



AUTHORIZATION FOR PAYROLL DEDUCTION OF CONTRIBUTIONS TO CASE WESTERN RESERVE UNIVERSITY

I HEREBY AUTHORIZE PAYMENTS TOWARD MY TOTAL PLEDGE OF \$ _____ TO BE DEDUCTED MONTHLY IN _____ EQUAL INSTALLMENTS OF \$ _____, STARTING WITH THE _____ PAY PERIOD.*

(number)

(monthly amt.)

(month/year)

*The deduction for CWRU employees paid on a semi-monthly basis will be taken from the last pay period each month.

PURPOSE:

Annual Fund: _____

Other: _____
(please specify)

DESIGNATION:

School/College: _____
(please specify)

Account Number: _____
(if known, please specify)

Additional Designation/Notes: _____

PLEASE TYPE OR PRINT:

NAME: _____

EMPLOYEE ID#: _____

HOME ADDRESS: _____

DATE: _____

SIGNATURE: _____

If CWRU alum, please list school(s) and year(s): _____

PLEASE COMPLETE THIS FORM AND RETURN TO:
Cindy Creegan, Associate Vice President, Advancement Services
CedarTech #314, Loc. Code 7035 | 216.368.8552

To email this form, please print it as a PDF and email as an attachment to uris-gifts@case.edu