



CHANGE OR TERMINATE EXISTING PAYROLL DEDUCTION AUTHORIZATION FORM

Please complete this form to **change or terminate** an existing payroll deduction. If you wish to initiate a payroll deduction, please use the Initiate Payroll Deduction Authorization Form.

Employee Name: _____ Employee ID: _____
Work Email: _____ Work Phone: _____

Check the appropriate box: Terminate payroll deduction Change payroll deduction

If requesting a change in payroll deduction, please include the total amount you wish to have deducted, not the increase or decrease in your current deduction.

Monthly Payroll		Total Pledge \$ _____
Amount to be deducted each month: \$ _____		
Starting Date: _____ (mm/yy)		
Number of Installments:		
12 (1 year)	24 (2 years)	36 (3 years)
48 (4 years)	60 (5 years)	72 (6 years)

Bi-weekly Payroll		Total Pledge \$ _____
Amount to be deducted each pay period: \$ _____		
Starting Date: _____ (mm/dd/yy)		
Number of Installments:		
26 (1 year)	52 (2 years)	78 (3 years)
104 (4 years)	130 (5 years)	156 (6 years)

Pledge distribution(s) per pay period:	Split evenly:	No	Yes
<i>(If yes, check the designations that apply or fill in other designations)</i>			
\$ _____			The Wake Forest Fund
\$ _____			The Wake Forest Fund for the College
\$ _____			The Wake Forest Fund for the School of Law
\$ _____			The Wake Forest Fund for the School of Divinity
\$ _____			The Wake Forest Fund for the Graduate School
\$ _____			The Wake Forest Fund for the Schools of Business
\$ _____			The Wake Forest Fund for Student Aid
\$ _____			The Wake Forest Fund for the ZSR Library
\$ _____			Deacon Club
Other:			
Amount: \$ _____	Designation: _____		
Amount: \$ _____	Designation: _____		
Amount: \$ _____	Designation: _____		
Amount: \$ _____	Designation: _____		
Amount: \$ _____	Designation: _____		

I understand that if I am terminating or changing a payroll deduction, that the change may not take effect during the current payroll cycle due to the time needed to process this request.

Signature: _____ Date: _____

Please submit this form to Gift Administration, Alumni Hall or email this form to wfugifts@wfu.edu