



2020-21 EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION FORM

Mercy College's faculty & staff have a long history of giving back to the College and paving the way for students with the drive to succeed. Thank you for your generous gifts to Mercy over the years – your support is essential to our success and future.

Making Giving Easy!

Please consider becoming a sustaining donor by enrolling in Mercy's Employee Payroll Deduction Program. Signing up is easy and you may spread your gift as you like.

Part 1: Employee Information

Last Name: _____ First Name: _____ Middle Initial: _____

Mercy CWID: _____ Mercy Department/School: _____

Address: _____

Email: _____ Phone: _____ I am an Adjunct Faculty

Part 2: Gift Designation

- YES, I will support the **Mercy College Annual Fund** (area of greatest need)! Designate my gift to the following funds: _____
Ex. General Scholarship Fund, Athletics Fund

Part 3: Payroll Deduction

Your deduction will be applied to the 2020-21 Fiscal Year and end on the last pay period (on or around June 30, 2021) unless otherwise specified or if you select to continue your gift indefinitely. Please note it may take up to 2 pay periods for your deduction to be processed.

Each pay period please deduct: \$ _____

BEGIN my deductions on (M/Y): _____

END my deductions on (M/Y): _____

- I would like to continue my gift indefinitely.

I authorize Mercy College to deduct the amount indicated from my pay each period. This authorization shall be in effect upon receipt of this form in Payroll until I cancel or change this authorization by email or in writing.

Signature: _____ Date: _____

Part 4: Make A One-time Gift Via Check Or Credit Card

- I would like to make a one-time gift of \$ _____ Check (make check payable to Mercy College)
 Credit Card (complete information below)

Please charge my Credit Card: Master Card Visa AMEX Discover Card

Card #: _____ Expiration Date (MM/YY): _____ / _____

Today's Date: _____ Cardholder Signature: _____

**THANKS FOR
YOUR SUPPORT!**

Submit Form & Questions: *Heather Apollonio, 914-674-7394, hapollonio@mercy.edu*
Interoffice Mail: *Tarrytown Suite 101, Office of Institutional Advancement, C/O Heather Apollonio*

FOR CLERICAL USE ONLY	Payroll Approver: _____	Finance Approver: _____	IA Approver: _____
	Effective Date: _____	Effective Date: _____	Effective Date: _____
	Full FY Amount: \$ _____		