



Payroll Deduction Form

LOCATION: _____ EMPLOYEE ID# _____ EFF DATE: _____

Social Security Number _____

Name (Print) _____

Please check the appropriate line within the box below for the frequency of your EDMC Education Foundation Deduction and enter the amount. You may choose to have the deduction processed once or twice each month. Please forward your completed form to your Human Resources department.

Human Resources personnel, forward this form to Payroll in your next pay pack.

Deductions should be no less than \$5.00 per deduction.

Confirm the accuracy of this deduction by reviewing your pay statements under the heading "Foundation." Contact your human resources representative if this appears to be inaccurate.

In the event you wish to discontinue your deduction, please check the appropriate line within the box below and forward this signed form to your Human Resources department.

All contributions to the EDMC Education Foundation are tax deductible when filing your year-end tax information to the extent allowed by law under the Foundation's 501(c)(3) IRS tax status.

Form box containing three options: Once a month deduction, Twice a month deduction, and Please discontinue my payroll deduction.

Employee Signature: _____

Date: _____