



# FACULTY & STAFF GIVING

UNIVERSITY OF CENTRAL OKLAHOMA

## Campus Payroll Deduction Form

### Contact Information

Name \_\_\_\_\_ Banner ID# \_\_\_\_\_  
Mr / Mrs / Ms / Dr First Middle Init. Last

☐ Home address \_\_\_\_\_  
Street City State Zip

Campus Department \_\_\_\_\_ Box \_\_\_\_\_ Ext \_\_\_\_\_  
(Information will be sent to your campus address, unless you check the home address box to indicate your preferred address.)

### Deduction

As a UCO employee, I hereby authorize the UCO Foundation to deduct \$\_\_\_\_\_ per pay period as my contribution to the advancement of the University of Central Oklahoma. I understand that deductions will begin on the first pay period of the month following the processing of this form. I understand that any changes to this request must be made in writing to [foundation@uco.edu](mailto:foundation@uco.edu) and that this completed form supersedes all previously submitted payroll deduction forms.

Begin the above deductions with the first available payroll in \_\_\_\_\_ (Month/Year)

☐ Option 1: Continue the above deduction until my total contribution to the University reaches \$\_\_\_\_\_.

☐ Option 2: Continue the above deduction until further written notice (ongoing).

### Gift Designation

- Please use the [Presidential Partner Campus Payroll Deduction Form](#) to establish a Presidential Partner payroll deduction giving commitment.
- Designations may be divided between funds, but must be an even dollar amount per fund.
- Donations to all non-endowed funds are subject to the Foundation's administrative fee policy at the time of the donation. Currently, there is no fee for non-endowed fund donations (new FY26).

Fund Number _____	Fund Name / Purpose _____	Amt. _____	% _____
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*Thank you for supporting the University of Central Oklahoma through the UCO Foundation.*

\_\_\_\_\_  
Donor Signature

\_\_\_\_\_  
Date

Please return **the signed** original to the UCO Foundation, Campus Box 133, or Evans Hall 102  
or by email to [gyoung9@uco.edu](mailto:gyoung9@uco.edu).