

Payroll Deduction Authorization Form for Staff Giving

Make an effortless, yet significant **IMPACT** with easy payroll deduction.

As part of the University Hospital family, you are among thousands of colleagues working together in the care of our patients. Choosing to donate to the Employee Appeal says that you believe so strongly in our mission that you are willing to give support above and beyond by making a gift. We know you care. We ask you to join the hundreds of UH employees who contribute and make a difference to those who need it most.

Deduction per paycheck	Annual Gift
\$5	\$130
\$10	\$260
\$25	\$650
\$60	\$1,560
\$100	\$2,600

GIFT INFORMATION

Payroll Deduction (bi-weekly)

I authorize **University Hospital** to collect \$ _____ from each University Hospital paycheck, and to remit the withheld amount(s) to **The Foundation for University Hospital**. I can change or cancel this at any time by contacting the Foundation office via email at giving@uhnifoundation.org or by calling (973) 972-1873.

This pledge is:

___ a new payroll deduction ___ an additional payroll deduction ___ a change in an existing pledge.

One-Time Gift

I have enclosed a check in the amount of \$ _____ (payable to The Foundation for University Hospital).

Charge \$ _____ to my Visa MC AMEX Discover

Name on Card: _____

GIFT DESIGNATION

Gift Designation: _____ (i.e., Name of Department, Service, Program)

Please use my gift where needed most. This gift is made in honor/memory of: _____

CONTACT INFORMATION

First Name: _____ MI: _____ Last Name: _____

Title: _____ Sal. _____

Home Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____ Preferred Email: _____

AUTHORIZATION

This authorization will continue in effect until termination of my employment with University Hospital or until I submit written notice of cancellation with the payroll office. Change or cancellation of this authorization must be made in writing.

UH Employee ID (A # on back of ID): _____ **Signature:** _____ **Date:** _____

To initiate, please return signed and dated form to:

The Foundation for University Hospital
 150 Bergen Street, UH D 209c
 Newark, NJ 07103

Scan and email the form to giving@uhnifoundation.org.

The Foundation for University Hospital raises funds to advance University Hospital's mission of improving healthcare, education, and wellness in greater Newark. Contributions to The Foundation for University Hospital sustain and enhance the critical clinical and community outreach programs of University Hospital.