CONCORDIA UNIVERSITY TEXAS

EMPLOYEE GIVING

Complete the below information and return to the Employee Benefits Manager in HR

Banner ID: _____ Employee Name: _____

_____

Payroll Deduction Option *(Check one option & complete amount)***:**

☐New deduction   ☐Replace existing deduction

I authorize Concordia University Texas (CTX) to deduct a monthly amount of $ _____ from my salary/ wages.

This agreement will remain in effect until CTX receives a written notice of cancellation from me or my financial institution.

_____

Gift Designation *(Check one option &/ or complete)*:

☐Area of greatest need   ☐Other: _____

_____

Cancel Deduction *(Check Option & complete amount)***:**

☐Stop existing monthly deduction of $ _____

Employee Signature: _____ Date: _____

Revised: October 10, 2017