

# 2019-2020 Faculty & Staff Campaign

## Payroll Deduction Form



Please complete each section and print the form. Make a copy for your records and forward the original to:

**Broward College Foundation**  
INTERCAMPUS MAIL: WHC/BLDG. 33/RM. 1127  
111 East Las Olas Blvd., 11th Floor  
Fort Lauderdale, FL 33301

Phone: 954-201-7414  
Fax: 954-201-7333  
www.broward.edu/foundation

Questions? Please call 954-201-7649 or e-mail [kcrawfor@broward.edu](mailto:kcrawfor@broward.edu)

**Note:** Required fields are designated by\*

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## Contact Information

<b>Employee ID*</b>	<b>Title</b>	<b>First Name*</b>	<b>Last Name*</b>		
<b>Campus Bldg/Room</b>	<b>Campus Address</b>		<b>Campus E-mail</b>	<b>Campus Ext</b>	
<b>Home Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>	
<b>Home Phone</b>	<b>Home E-mail</b>				
<b>Have you ever attended Broward College?*</b>	Yes	No			

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## Payroll Deduction Information

**Payroll Deduction Start Date (mm/dd/yyyy)\***

### Type\*

This is a **new** payroll deduction.

**Replace** my existing payroll deduction.

In addition to my existing payroll deduction, please **add** another contribution.

### Deduction Amount Per Paycheck\*

**\$5** (\$120 annually)

**\$42** (\$1,008 annually)

**\$10** (\$240 annually)

Other amount\*\*

**\$21** (\$504 annually)

## Please designate your gift\*

American Dream Scholarship

First Generation in College Scholarship

Other

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I hereby authorize that my contribution to the Broward College Foundation be deducted from my paycheck. This authorization will remain in effect until canceled by me or by payroll. I certify that I am an employee of Broward College and understand that termination of employment will cancel deductions made under this authorization.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Employee Signature**

The Broward College Foundation is incorporated under the laws of the State of Florida as a non-profit organization and is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code, and as a publicly supported charitable organization under Sections 509(a)(1) and 170(b)(1)(A)(vi). Please consult your financial advisor for guidance relative to the deductibility of contributions made to the foundation.

**Thank you!**  
**When we are all in, we all win!**

INTERNAL USE ONLY: Increase/decrease by \$ \_\_\_\_\_ per paycheck for \_\_\_\_\_ Batch