

Seattle Central College Payroll Deduction Form 2016-17

Name:	SID or SSN:	
	(Required for payroll deductions)	
Dept.:	Mailstop:	Phone:
Ontion 1. Continual Boyroll	Doduction	
Option 1: <u>Continual Payroll</u>	<u>Deduction</u>	
Amount to deduct from eac	h paycheck: \$	<u></u>
Date to begin:		
		annually & do not require a new form each year)
Option 2: One-time gift		
Total pledge amount: \$		
		(III a f) and a dead to
	tions between my next	(# of) paychecks
Please check one		
☐ Begin imm	ediately	
☐ Date to be	gin:	

Thank you for your support!

SIGNATURE: _____ Date____

Please return your completed form to the Foundation Office in BE4180 or to Emily Thurston at emily.thurston@seattlecolleges.edu. Questions? Call Emily at 206-934-6925