



How to Complete and Submit a UNLV Employee Payroll Deduction Form

Thank you for choosing to support your favorite UNLV program(s) through payroll deduction. Please follow the following steps to complete and return this form.

1. Visit http://foundation.unlv.edu/giving_portfolio.html to choose which UNLV program(s) you want to support. On the lines provided on the Payroll Deduction form, please indicate the fund name and fund number, along with the amount you want to contribute **each pay period**. Please sign the form and complete your contact information at the bottom.

Are you a new donor to payroll deduction? Please total the amount per pay period you want to donate. Carry this total to the authorization paragraph (“I HEREBY AUTHORIZE...”) and sign and date the form.

Are you currently using payroll deduction and want to add new funds and amounts? This form supersedes previous authorizations. Please add the new funds and new totals in the “new contributions” section. Then, check the box next to “continued contributions” and write the total amount you currently give on the line provided. Finally, total all amounts per pay period, carry this total to the authorization paragraph (“I HEREBY AUTHORIZE...”) and sign and date the form.

Are you looking for a fund that isn’t listed? UNLV has more than 800 funds—too many to list on this Web site. If you have a program in mind but don’t see it, please call the Annual Giving staff at 895-3641.

2. Make a photocopy of this form for your records. Then send the original signed form in a sealed envelope to the UNLV Foundation in campus mail to MS 1006 or mail the form to UNLV Foundation, 4505 Maryland Parkway, Box 451006, Las Vegas, NV 89154-1006.
3. The UNLV Foundation will record your gift and forward a copy of this authorization to payroll. Please allow up to two pay periods for your gift deductions to activate.

Thank you! Your gift will invent the future at UNLV.

Payroll deduction is available for current UNLV employees who receive regular paychecks from UNLV. Your gift through payroll deduction will remain in effect until you cancel/change this authorization in writing or termination of employment.

The UNLV Foundation is a Nevada non-profit corporation organized for the purpose of encouraging voluntary private support of UNLV. A small portion of designated gifts through the UNLV Foundation and/or the NSHE Board of Regents is reinvested in development activities related to raising private funds for UNLV. This money may be used for operating expenses, travel, hosting, and university receptions to produce further gifts.

The Internal Review Service considers any benefits and privileges given in recognition of charitable gifts as a reduction in the value of a gift. The UNLV Foundation has determined the estimated fair market value of benefits and privileges conferred upon members of its President’s Associates, President’s Inner Circle, Dean’s Associates, and Student Life Associates gift clubs to be \$100. We suggest that you contact your tax advisor for further information about the deductibility of your donation.

EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION FORM

Please use this form if you are initiating or changing your payroll deduction.



NEW CONTRIBUTIONS

I would like to make a donation to UNLV through Semi-monthly Monthly payroll deduction.

I would like to allocate my gift to (minimum monthly allocation is \$10 per fund):

Fund name: _____ Fund #: _____ Amount: \$ _____

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Find fund names and descriptions at foundation.unlv.edu/giving_portfolio. TOTAL PER PAY PERIOD: \$

CONTINUED CONTRIBUTIONS

I would also like to continue my existing gift through payroll deduction.

Program(s) currently supported: _____

Total current payroll deduction: \$ _____

(No fund number needed)

NEW TOTAL PER PAY PERIOD: \$

Comments: _____

My spouse's/partner's company offers matching gifts. The required form is signed and enclosed.

I hereby authorize payroll to deduct _____ monthly from my salaries and wages for philanthropic gifts to the UNLV programs of my choice identified on this form.

This authorization will remain in effect until cancelled in writing by myself or by payroll.

I certify that I am an employee of the University of Nevada, Las Vegas and understand that termination of employment will cancel all deductions made under this authorization.

Signed: _____ Date: _____

Dr./Mr./Mrs./Ms. _____ UNLV ID Number: _____
First Name Last Name

College/Dept.: _____

Campus Mail Stop: _____ Campus Phone: (702) _____

Are you on Lotus Notes? Yes No My e-mail address is: _____

Home Address: _____

City _____ State _____ Zip _____

Home Phone: (702) _____

Spouse/Partner: _____

I am employed as: Classified Professional Faculty UNLV Alumnus/a Year: ____ Major: _____

Name when enrolled: _____

Please return your completed form to the UNLV Foundation:

University of Nevada, Las Vegas, 4505 Maryland Parkway • Box 451006, Las Vegas, NV 89154-1006

If you need more information, please call the Annual Giving department at (702) 895-3641. PLEASE keep a copy for your records.