

Revocation of Payroll Deduction

WIU Foundation

To: WIU Foundation Office, Sherman Hall 303	I am paid: 🗆 Monthly	□ Semi-monthly	□Bi-Weekly
Please discontinue the following payroll deduct	ion.		
Deduction For:ORGANIZATION	Amount Deducted Per Pay Period: \$		
Name:LAST	FIRST	MIDDLE	
Street:	City:		
WIU ID Number:			
EFFECTIVE WITH THE DATE	РАУСНЕСК.		
Signature:	Date:		

General Information

This form is used to revoke/stop deductions currently being made through payroll to the WIU Foundation. If this form is not completed and returned to the Foundation, your payroll deduction will continue in perpetuity.

Please note, the effective date above will be enacted <u>only</u> if the form is completed prior to Payroll's cutoff date to make the change effective by the elected date. If there is not ample time to process the changes by the effective date above, the change will go into effect in the following pay period.

Please return to: WIU Foundation, Sherman Hall 303 Western Illinois University 1 University Circle Macomb, IL 61455

For more information or assistance in completing this form, please contact Gift Processing at 309-298-1861.