United Way of Anchorage

PAYROLL DEDUCTION FORM

Organization name: _____ **Date:** _____

PAYROLL CONTACT INFORMATION

Contact person for questions regarding payroll deduction contributions:

Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Email: _____ Fax: _____

PAYROLL DEDUCTION AND DISBURSEMENT INFORMATION

We will begin deducting contributions from employee payrolls starting on this date: ____ /____ /____

We will send Payroll Deduction contributions to United Way of Anchorage:

- ❑ Monthly
- ❑ Quarterly
- ❑ Other _____

Payroll Deduction contributions will be disbursed to United Way of Anchorage by:

- ❑ Check
- ❑ Direct deposit

DONOR REPORT

To match payments with the outstanding pledges, United Way of Anchorage requests a donor report. Names and contribution amounts are the only information needed. Please ensure the total of the check or direct deposit equals the total of the individual payments.

A report with donor names and their corresponding payments will be:

- ❑ Included with check
- ❑ Emailed to finance@ak.org
- ❑ Other _____

UNITED WAY CONTACT INFORMATION

Mail payroll deduction contributions to:

United Way of Anchorage
Attn: Finance
701 W 8th Ave, Suite 230
Anchorage, AK 99501

Please direct questions to:

Sue Ross, Director of Finance/Accounting, at 907-263-3813 or sross@ak.org