WESTERN ILLINOIS UNIVERSITY

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 deduction.

Deduction For: _____ Amount Deducted Per Pay Period: $_____
ORGANIZATION

Name: _____
LAST FIRST MIDDLE

Street: _____ City: _____

WIU ID Number: _____

EFFECTIVE WITH THE _____ PAYCHECK.
DATE

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 only 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.