

WKAR-TV MSU PAYROLL DEDUCTION AUTHORIZATION FORM

I want to support WKAR-TV with my gift of \$ _____ as follows:
(Check and complete one option)

- \$ _____ per month for _____ consecutive months beginning in _____ (specify month/yr.)
- Deduct my gift in one lump sum from my _____ check.
(month/yr.)

Please renew my payroll deduction automatically each year. (select one) YES (Evergreen Partners) NO

I authorize the payroll deduction and transmittal to Broadcasting Services/WKAR-TV for the amount indicated above.

Signature _____ ZPID # _____

(Please print)

Name _____ Department _____

Address _____ Daytime Phone _____

City/State/Zip _____ Date _____

For office use only
Split _____
Motiv. _____

Payroll (check one)

- Salary
- CT/Labor
- Grad Asst.

Please complete and send this form to **WKAR-TV, 283 Communication Arts Bldg., East Lansing, MI 48824-1212**. This form must be completed and returned to WKAR-TV before your payroll deduction plan can begin. For more information call WKAR Membership Services (517) 432-9527.