



Paul and Lulu
HILLIARD
University Art Museum
University of Louisiana at Lafayette

UL Payroll Deduction Form

Name: _____

Social Security No. or CLID _____ Work Phone: _____

Option 1

One-time deduction of \$ _____

Option 2

Payroll deduction of \$ _____ per check

- 12 Pay Periods
- 10 Pay Periods
- 26 Pay Periods
(for employees paid bi-weekly)
- Continue monthly deductions until I
notify the Payroll Office

Total Gift: \$ _____

Signature: _____ Date: _____