

CHARITABLE GIVING PAYROLL DEDUCTION AGREEMENT

Payroll Template for Charitable Contribution Withholding

EMPLOYEE INFORMATION

Employee Name:	_____	Employee ID:	_____
Department:	_____	Job Title:	_____
Email Address:	_____	Phone Number:	_____

CHARITABLE ORGANIZATION DETAILS

Organization Name:	_____
Tax ID / EIN:	_____
Mailing Address:	_____

DEDUCTION AUTHORIZATION

I authorize my employer to deduct the following amount from my paychecks:

Deduction Amount (\$):	_____	Effective Start Date:	_____
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Frequency of Deduction:

☐

One-time deduction

☐

Every pay period (Ongoing)

☐

Monthly deduction

AUTHORIZATION AGREEMENT

I hereby authorize my employer to deduct the amount specified above from my earnings each pay period, or as a one-time deduction as indicated, and to remit these funds to the designated charitable organization. I understand that this authorization is voluntary and will remain in effect until I provide written notice of termination to the payroll department, or until the designated end date of this program. I acknowledge that it is my responsibility to determine the tax-deductibility of this contribution and to retain appropriate records for tax reporting purposes.

Employee Signature

Date

Payroll / HR Representative Signature

Date