



## Payroll Deduction Form

This form is to be used to authorize payroll deductions. All employees must complete this section in its entirety.

Today's Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Type of Deduction	Total Requested Amount	Deduction Amount Per Pay Period
The Bonus Fund supports 400+ local and regional charities who participate in the Birdies for Charity program. 100% of funds benefit the charities via the annual bonus match.	\$ _____	\$ _____  For _____ pay periods

I hereby authorize EMPLOYER to make the above deductions from my pay in accordance with the above terms. I understand that I am responsible for satisfying the above amounts. I understand and agree that any amount that is due and owing at the time of my termination, regardless of whether my termination was voluntary or involuntary, will be deducted from my last paycheck. I represent this authorization is executed voluntarily and has not been made as a condition of my continued employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The Quad Cities Golf Classic Charitable Foundation (D/B/A Birdies for Charity) is a registered 501(c)3 organization that benefits 400+ local and regional charities through the Birdies for Charity program.  
 EIN # 93-1332421