# Employee Payroll Authorization Increase Form

I hereby request that the payroll deduction sent to the SMSU Foundation be increased to $_____, totaling $_____ per pay period to the designation of:

_____ Southwest Fund

_____ Other (please specify below)

I understand that said deductions may be initiated, changed, or revoked only by my written permission.

_____  _____  _____
Date      Employee Name (Print)    Employee Signature

Please return this form to: SMSU Foundation, Founders Hall 229 or Foundation@smsu.edu