

Dear YSU Employee:

Thank you for supporting WYSU 88.5 FM through the payroll deduction program at Youngstown State University. Payroll deduction is available to all current YSU faculty and staff.

To help us efficiently process your payroll deduction pledge, please complete this form and return it directly to me at WYSU-FM.

Thank you again for your generous pledge! Please feel free to contact me at any time with questions about your WYSU membership.

Sincerely, Cindy Bella WYSU-FM		
AUTHORIZATION FOR PAYROLL 1	DEDUCTION TO WYSU-FM:	
Employee Name	First	Middle
Based on your contract, do you prefer that		
		•
6 months	9 months 12 months	
Please indicate below how often you are p	paid:	
□ Bi-Weekly	□ Paid on the 15 th , and on the last day of the month	
Total Amount of Pledge \$		
I hereby authorize Youngstown State Uni	versity to make this deduction from my ea	rnings as follows:
□ New Authorization	Start Date	
□ Change	Stop Date	
□ Cancellation	Amount Per Pay \$	
Employee Signature	Da	te
Banner ID:		

Please return this form to: Cindy Bella, WYSU-FM