



JALC PAYROLL DEDUCTION FORM

I wish to **START** a payroll deduction(s) to the John A. Logan College Foundation.

Amount to <u>deduct</u> Per Pay Check	Account Number	Account Name
\$ _____		
\$ _____		
\$ _____		

I wish to **CHANGE THE AMOUNT** of my current payroll deduction(s).

<u>Current</u> amount Per Pay Check	<u>New</u> amount Per Pay Check	Account Number	Account Name
\$ _____	\$ _____		
\$ _____	\$ _____		
\$ _____	\$ _____		

Total amount of Payroll Deduction per pay check \$ _____

Printed Name: _____ Signature: _____

Date: _____