



2007 Payroll Deduction Disbursement Form

Company Name: _____ ECC: _____

of Employees: _____

Your company has made payroll deductions available to your employees for this year's United Way campaign. To help us carry out your intentions correctly, we request the following information from you or the appropriate company representative.

A. Payroll deduction contributions are to be disbursed as follows:

- We will disburse payroll deduction contributions to United Way of Anchorage.
- We will disburse payroll deduction contributions to appropriate United Ways throughout Alaska based on:
 - Employee home address
 - Employee work address
 - Employee donor designation code
- Other _____

B. For all payroll deductions: Payroll deduction gifts will be disbursed as follows:

- Monthly Quarterly Other _____

Date starting: _____

C. Who is your company's billing contact for payroll deduction contributions?

Name: _____ Phone: _____

Address: _____ Fax: _____

City/State/Zip: _____ E-mail: _____

Please return this form with your campaign materials or mail/fax to:

United Way of Anchorage
701 W. 8th Ave., Suite 230
Anchorage, AK 99501
Fax 907.263.3801