

**CDA & CCF PAYROLL DEDUCTIONS
AUTHORIZATION/CANCELLATION FORM FOR YEAR 2014**

Employee Name: _____ Soc. Sec. No. ____--____--____
Address: _____ Parish: _____

**** AUTHORIZATION ****

I hereby authorize the withholding from each paycheck of the following amount(s) for the purpose(s) and date(s) indicated:

➤ **CDA pledge for 2014***

Please deduct \$_____ from each paycheck beginning on ___/___/___ until:

- The end of the calendar year, or
- The total sum of \$_____ has been withheld.

**Please do not complete a CDA pledge card if you contribute through payroll deduction. Your gift by payroll deduction will be reported to your parish and applied towards their CDA goal.*

➤ **CCF Contribution for 2014**

Please deduct \$_____ from each paycheck beginning on ___/___/___ until:

- The end of the calendar year, or
- The total sum of \$_____ has been withheld.

Designate the contribution to:

- Unrestricted gift in support of Catholic education and communication programs.
- Gift to the _____ Fund for its stated purpose(s).
Fund Account number: _____

Donor name: _____

**** CANCELLATION ****

I hereby authorize the cancellation of the following payroll deduction(s) effective ___/___/___:

- CDA pledge for 2014
- CCF Contribution for 2014

Note: all authorizations/cancellations must be submitted 10 calendar days prior to payday.

Employee Signature: _____ Date: ___/___/___

cc: Finance Office at Diocesan Center.