

Chicago Auto Show's First Look for Charity Employee Payroll Deduction Form

Name: _____

Employee ID#: _____

Home Address: _____

City: _____ **State:** _____ **Zip:** _____

Hospital Department Name: _____

Hospital Phone #: _____

I would like to purchase _____ tickets (\$250 each) for the Chicago Auto Show's 2014 First Look for Charity. Please use this form as my authorization to process this deduction from my paycheck. My total purchase is \$_____.

Your total will be evenly deducted between six (6) pay periods, starting on 2/7/2014 for employees on the Hospital or Corporate payroll or 2/14/14 for FPN employees. This form must be returned by 1/31/14 in order to process this pledge.

Signature: _____ **Date:** _____

*Please fax or inter-office your completed form to the Foundation Office,
Attn: Joanna Voorhees. Fax # is 708.503.3270.