

## Payroll Deduction

Name: \_\_\_\_\_

Address: \_\_\_\_\_

I/We pledge a total of\$ \_\_\_\_\_ to Maine Maritime Academy's \_\_\_\_\_ by  
payroll deduction for a period of \_\_\_\_\_ (or\$ \_\_\_\_\_ per pay period on-going, until otherwise  
notified).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\* Please fill out and return to the Development Office, Wyman House

If you have any questions please contact, the Development Office at 326-2470 or

email [frieda.mavor@mma.edu](mailto:frieda.mavor@mma.edu)

**For Human Resources and Development Only:**

----- per pay period beginning on \_\_\_\_\_ (date)