



**SMC PAYROLL DEDUCTION AUTHORIZATION FORM**

Name ..... Ext. .... SS# .....

Mailing Address .....

Please Deduct \$\_\_\_\_\_ to benefit  President's Circle (Min. \$100 monthly)  SMC Associates (Min. \$10 monthly)

Other (please explain) .....

Please cancel my current deduction of \$ .....

Please increase my previous pledge deduction • My new total deduction is \$ .....

Employee Signature ..... Date .....

Please return completed form to the SMC Foundation, located at 2714 Pico Boulevard, Suite 230 • 310.434.4215  
Thank you for your generous gift!