UNITED NATIONS STAFF 1% FOR DEVELOPMENT FUND

United Nations - New York

Name:_____ Index number:_____

I hereby authorize the Payroll Section to make the following deduction from my salary as my contribution to the United Nations Staff 1% for Development Fund (New York):

Please choose and fill in one option:

(a) ☐ A monthly contribution of $_____ (Please indicate an amount. It will not be be adjusted to reflect salary changes.)

(b) ☐ A monthly contribution of $_____ (Please calculate and indicate an initial amount. Payroll will adjust each year to keep it at 1% of net salary.)

I understand that authorization for the monthly deductions remains valid until cancelled in writing and that the United Nations cannot be held responsible for the disposition of funds collected.

Date:_____ Signature:_____

Please return this form to: United Nations Staff 1% for Development Fund (New York)

Mr. Robert Johannsen, Treasurer
Email: robertljohannsen@gmail.com

(For 1% Fund and Payroll use only)

Payroll=

cols 6 - 11 Index number: __ __ __ __ __ __

cols 12 - 14	cols 16 - 24	cols 25 - 28	
R 33	__ __ . __ __	1PC	(non-adjusted)
R 33	__ __ . __ __	1PCX	(adjusted)
K 33	__ __ . __ __		(terminate)