

Navigate to <https://www.usmd.edu/give>

Click the login button. Use your Coppin network credentials to login.



Click on the Coppin logo from the campus login page.



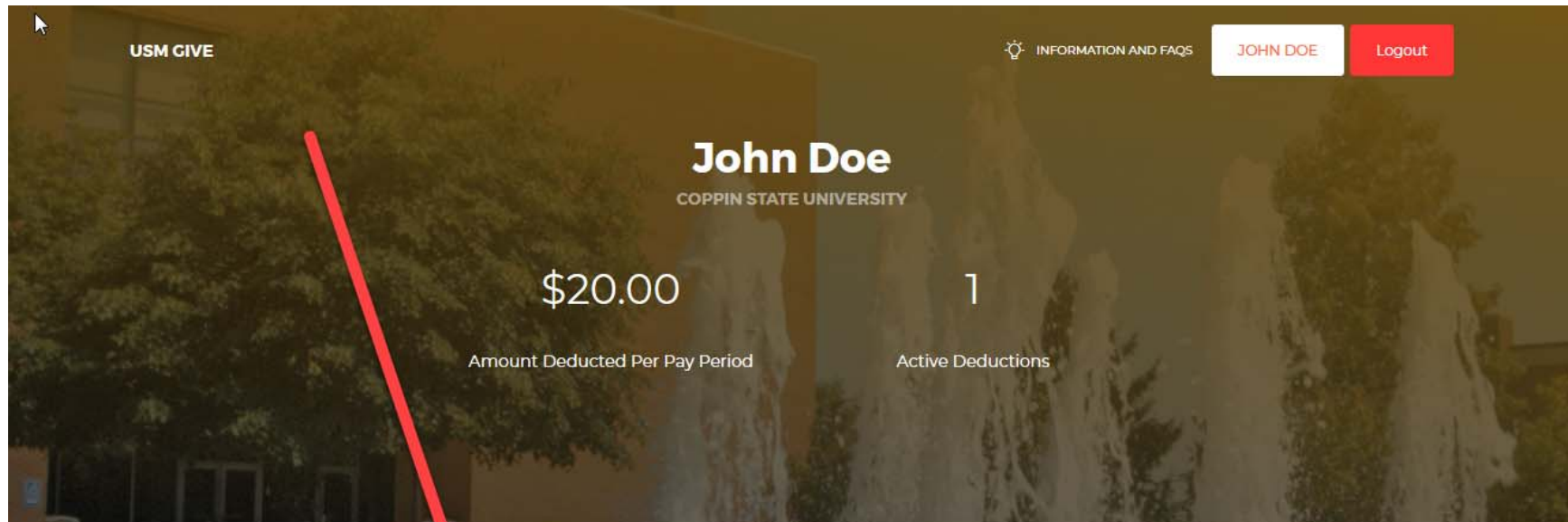
Select Campus For Login

Select your institution of employment below, you will be re-directed to your institution's login page and then re-directed back here once verified.



If you have a current deduction, you will see that information here.

Click on the **Click here to begin a new payroll deduction** button

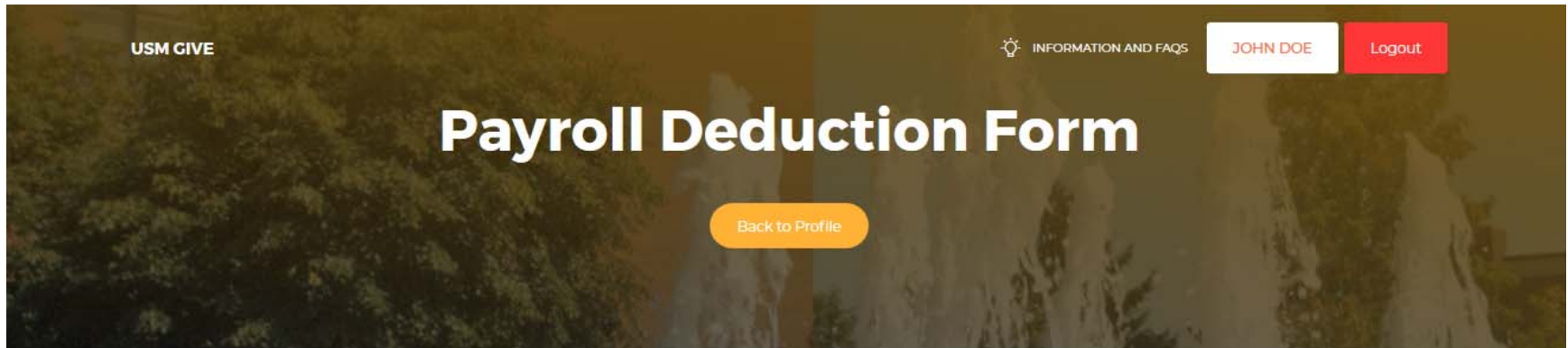


Current Payroll Deductions

[+ Click here to begin a new payroll deduction](#)

 [If you would like to donate via credit card, please click here.](#)

On the Payroll Deduction Authorization Form, select the fund you would like to contribute to by clicking on the pulldown menu.



PLEASE FILL OUT ALL OF THE FIELDS TO COMPLETE YOUR DEDUCTION

Payroll Deduction Authorization Form

Employee Name:
JOHN DOE ✓

Select the Fund that you would like to donate to at Coppin State University:
-- Please select --


Enter the amount per pay period that you would like to deduct:
\$ 0.00

[Click here to explore more giving options at Coppin State University.](#)

To donate to an additional designation, please complete this process first, then create a new payroll deduction for the additional designation.

Please select how many pay periods per year that you are paid:

- 26 pay periods (Standard bi-weekly)
- 21 pay periods



If you don't see the fund to which you would like to contribute, select the "Other" option, and write in your option in the "Other Fund" section. Click hyperlink in that section to see a full designation list.

PLEASE FILL OUT ALL OF THE FIELDS TO COMPLETE YOUR DEDUCTION

Payroll Deduction Authorization Form

Employee Name:
JOHN DOE

Select the Fund that you would like to donate to at Coppin State University:
Other

Other Fund:

[Click here to explore more giving options at Coppin State University.](#)

To donate to an additional designation, please complete this process first, then create a new payroll deduction for the additional designation.

Enter the amount per pay period that you would like to deduct:
\$

Please select how many pay periods per year that you are paid:

- 26 pay periods (Standard bi-weekly)
- 21 pay periods

Payroll Deduction Guidance

21 Week Pay Cycle		26 Week Pay Cycle	
Bi-weekly Amount	Annual Total	Bi-weekly Amount	Annual Total
\$2.39	\$50 a year	\$1.93	\$50 a year
\$4.77	\$100 a year	\$3.85	\$100 a year
\$11.91	\$250 a year	\$9.62	\$250 a year

Refer to the Payroll Deduction Guide to tally your total gift amount.

Payroll Deduction Guidance

21 Week Pay Cycle		26 Week Pay Cycle	
Bi-weekly Amount	Annual Total	Bi-weekly Amount	Annual Total
\$2.39	\$50 a year	\$1.93	\$50 a year
\$4.77	\$100 a year	\$3.85	\$100 a year
\$11.91	\$250 a year	\$9.62	\$250 a year
\$23.81	\$500 a year	\$19.24	\$500 a year
\$35.72	\$750 a year	\$28.85	\$750 a year
\$47.62	\$1,000 a year	\$38.47	\$1,000 a year
\$71.43	\$1,500 a year	\$57.70	\$1,500 a year
\$95.24	\$2,000 a year	\$76.93	\$2,000 a year

In the Authorization Statement section, select the option that you prefer. You can opt to have your deduction continue until you change or cancel it, or you can set it to continue through the last pay period of 2020. All deductions will begin on the first pay period of 2020.

Authorization Statement

I, **JOHN DOE**, authorized the State of Maryland to deduct from my salary the above amount and forward it to Coppin State University Foundation. This deduction will:

- begin on the first pay period of the calendar year **2020** and continue until notice to change or cancel is submitted by me through the payroll deduction site.
- begin on the first pay period of the calendar year **2020** and continue through the end of the last pay period of **2020**.

Due to IRS tax regulations, you may not donate to an account on which you are the signatory. I attest that I am not an authorized signer and do not have spending authority for this account.

[Proceed to Verification Page](#)

On the Payroll Deduction Verification Page, you can review your information and submit your payroll deduction.



VERIFICATION PAGE

Payroll Deduction Verification

Please validate that all data below is correct. If not, [go back to previous page to change choices.](#)

Employee Name:	JOHN DOE
Fund to donate to at Coppin State University	Annual Fund Unrestricted
Amount to deduct per pay period:	\$20 <i>(Total for year, if you are paid on 26 week pay cycle: 520.00)</i> <i>(Total for year, if you are paid on 21 week pay cycle: 420.00)</i>

Authorization Statement

✓ I, **JOHN DOE**, authorized the State of Maryland to deduct from my salary the above amount and forward it to Coppin State University Foundation. This deduction will begin on the **first pay period** of the calendar year **2020** and **continue through the end of the last pay period of 2020.**

Due to IRS tax regulations, you may not donate to an account on which you are the signatory. I attest that I am not an authorized signer and do not have spending authority for this account.

** - required field*

Submit Payroll Deduction