

UNITED WAY AUTHORIZATION AND RECORD (RETIREEES)		<input type="checkbox"/> New Form <input type="checkbox"/> Change Current Donation <input type="checkbox"/> Change Current Recipient <input type="checkbox"/> Cancel Current Form		
RETIREE NUMBER RETIREE NAME				
DONATION		RECIPIENT		
		Check One	County Code	County
<input type="checkbox"/>	FIXED AMOUNT PAYROLL DEDUCTION		920	Anderson
	\$ _____		921	Knox
			922	Loudon
			923	Morgan
			924	Roane
<input type="checkbox"/>	CASH PAYMENT		925	Blount
	\$ _____		927	McMinn
			933	Jefferson
<input type="checkbox"/>	ONE-TIME DEDUCTION			
	\$ _____			
I authorize the Company to make the indicated deductions from each pay period, and I may cancel or change my deduction at any time.				
SIGNATURE		DATE		
		Other County (Cash Only):		

Mail to:

ORNL Pension Payroll
1 Bethel Valley Rd MS 6438
Oak Ridge, TN 37831-9984