

# **Employee Giving Form**

## **PART 1: Employee Donor Information**

Name	(Employee ID #)	
Home Address	City	Zip
Phone	Email	

### **PART 2: Select a Payroll Deduction Option**

Recurring Gift of:

□ \$5/pay cycle (\$120 annually) □ \$10/pay cycle (\$240 annually) □ \$25/pay cycle (\$600 annually)

□ \$42/pay cycle (\$1,008 annually) □ \$50/pay cycle (\$1,200 annually)

Custom: \$ \_\_\_\_/pay cycle

#### **PART 3: Signature**

I declare that the information I've included above is accurate. My signature below authorizes the recurring gift payroll deduction selected above to begin on the next available pay cycle and continue until further notification.

Signature

Date

#### Thank you for your contribution to Kitsap Regional Library Foundation.

Your donation is tax-deductible. You may change or stop payroll deduction at any time.