

Fraser Educational Foundation Employee Contribution Program

Name: _____

School: _____

I hereby authorize the Fraser Public Schools to deduct from my pay the amount designated below. I understand that this money will be used by the Fraser Educational Foundation for the benefit of the students of the Fraser Public Schools District. There are **three** ways to participate:

Payroll Deduction – Per Pay

I wish to donate _____ \$2.00
_____ \$5.00
_____ \$10.00

Other (specify) _____

Annual Contribution

I wish to make an annual contribution of \$ _____ each year at the following time _____.

One-time Contribution

I wish to make a one-time contribution of \$ _____.

Signature: _____

This tax deductible charitable contribution will be automatically renewed unless donor requests a change. Thank you.

Please print and return the completed form to the Superintendent's office.