Fraser Educational Foundation 2019-2020
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 fill out the form. Return the completed form to the Superintendent's office.