

PAYROLL DEDUCTION FORM/EMPLOYEE

Organization name: **Pascua Yaqui Tribe Charitable Organization**

Date: _____

EMPLOYEE DONOR INFORMATION

To match payments with the outstanding pledges, Pascua Yaqui Tribe Charitable Organization will receive a donor report from Pascua Yaqui Finance Department.

To donate to the Pascua Yaqui Tribe Charitable Organization please fill out and sign the payroll deduction authorization below:

(a) I hereby authorize my employer to deduct from my earnings **each pay period** the said amount as designated below. I also understand that this will be a recurring amount each pay period until I sign a form with the Pascua Yaqui Tribe Finance Department to discontinue the payroll deduction. Initial Here _____

Amount: _____

or

(b) I hereby authorize my employer to deduct from my earnings **one time** for the amount listed below. Initial Here _____

Amount: _____

Special Designation: Employees can select a special designation of their gift by checking one box below. By not selecting a special designation your donation will be allocated to "General Community Assistance".

Sports: _____

Cultural-Language and History Preservation: _____

Nutritional Support: _____

Education: _____

Arts & Music: _____

Humanitarian Aid to Traditional Yaqui Villages in Sonora, Mexico _____

General Community Assistance: _____

Donor Signature: _____ Date: _____

