



PARK CITY
EDUCATION FOUNDATION

PAYROLL DEDUCTION AUTHORIZATION

The undersigned hereby authorizes the Park City School District to deduct a portion of his/her after-tax earnings each payroll period in the following way:

In payment for: **Amount per Month:**

Donation to the Park City Education Foundation \$_____ .00

To begin in _____ (month/pay period)

Number of Pay Periods/Year **12**

Projected Yearly Total Donation **\$_____ .00**

Signature _____ Date _____

Print Name _____

Direct this payment to: No Preference Jeremy Ranch McPolin Parley's Park
 Trailside Ecker Hill Treasure Mountain High School

This Donation Is From Anonymous or:

In Honor of/In Memory of (circle one, if applicable):

Mailing Address for Tax Receipt:

Street/PO Box _____

City _____ State _____ Zip _____

Phone _____ Cell _____

E-mail _____

Please keep a copy of this for your records.