

Girls' Haven Donation Form For Payroll Deductions

Employee:

By signing this form, I, _____, hereby agree to donate the following amount of money, _____, from my payroll check to Girls' Haven each week _____, every two weeks _____, every month _____. This contract is valid for six (6) months _____, one year _____, other _____.

Instead of the above mentioned, I, _____, prefer to make a donation in the amount of _____ to Girls' Haven. I wish to have this one-time amount withdrawn from my payroll check the week of _____.

Company:

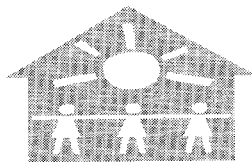
As the designated payroll representative for my company, I, _____, state that _____ (Company Name) will match the above named employee's donation in the amount of _____ every week _____, every two weeks _____, every month _____, for a one-time only donation _____.

This contract is valid as long as the above named individual is an employee of _____. Or, until the above named individual fulfills his/her gift to Girls' Haven and wishes to terminate this contract.

Employee's Signature & Date

Company Name

Company Representative's Signature & Date



GIRLS' HAVEN
3380 FANNIN • BEAUMONT