

PAYROLL DONATION PROGRAM

**Your Contribution Makes a Difference!
Your Donation Helps KPSF Provide Amazing
Learning Opportunities to KISD Students**



If you want to participate for the first time or increase your donation, simply fill out this form and interoffice (pony) mail it to Payroll at Central Office.

YES. I will support KPSF by donating a monthly contribution of \$ _____ and I authorize KISD to deduct this amount from each of my payroll checks beginning the next pay period.

I elect to change my existing donation amount from \$ _____ to \$ _____, effective the next pay period.

YES. I will support KPSF by making a one-time contribution of \$ _____

Optional: This gift is given in honor/memory of _____

EMPLOYEE NAME: _____ CAMPUS: _____

HOME ADDRESS: _____

SIGNATURE: _____

DATE: _____ EMAIL: _____

I understand that if I select payroll deduction, my employer, the Kerrville Independent School District, will deduct the authorized amount from my salary each month and remit to the Kerrville Public School Foundation. This is a tax-deductible charitable contribution and I need to keep a record of the amount I donate each year for claiming a deduction on my individual tax return. This authorization shall become effective upon receipt and shall remain in effect until the KISD Payroll Office receives a written notice of cancellation or changes.

