



### Payroll Deduction Donation Form

Employee Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Donation Start Date: \_\_\_\_\_

Donation Amount to be deducted: \_\_\_\_\_

This donation will be deducted on every paycheque.

Declaration:

I, the undersigned, authorize St. Amant Foundation to deduct the amount noted above from my paycheque as stated above. I understand that a Charitable Tax Receipt for the full amount donated will be issued annually for income tax purposes. I am aware that I may change or terminate my donation at anytime I so choose.

Donor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Thank you for your gift!***

***Return this signed form to the St. Amant Foundation.***

***Questions?***

***Contact Agnès at 204.258-7073 or [achampagne@stamant.ca](mailto:achampagne@stamant.ca)***