

Donor Information

School Division

Name of Donor

Address

I authorize my school division to deduct:

\$ one-time deduction in
(Month/Year, e.g., JAN 2020)

\$ per pay period beginning in and ending in
(Month/Year, e.g., JAN 2020) (Month/Year, e.g., JAN 2021)

\$ per pay period until further notice

\$ annually in for years
(Month e.g., JAN)

Designate Donation*

General Endowment

Special Instructions

I wish my donation to remain anonymous

I wish only the amount of my donation to remain anonymous

Signature

Date

(Day/Month/Year, e.g., 31 JAN 2020)

* For more information, please contact the McDowell Foundation at mcdowell@stf.sk.ca or visit the website at mcdowellfoundation.ca/donations.

Please note: Official tax receipts will be issued in January or February by the McDowell Foundation.