

Bozeman School District #7
Payroll deduction agreement
Fiscal Year 2015-2016

I hereby authorize the following amount to be taken out of my monthly paycheck during the 2015-2016 year and distributed to the designated entity.

<u>Fund Name</u>	<u>Monthly Dollar Amount</u>	X	<u>Number of Months</u>	=	<u>Total Donation</u>
Bozeman Friends of Music	\$ _____	X	_____	=	\$ _____
Bozeman Schools Foundation	\$ _____	X	_____	=	\$ _____
Hawk Boosters	\$ _____	X	_____	=	\$ _____
Out of District Tuition	\$ _____	X	_____	=	\$ _____
Worthy Student Scholarship	\$ _____	X	_____	=	\$ _____
Total Deduction				=	\$ _____

Beginning on: _____

Employee Signature

Date

Print Name

Please return this form to the Payroll Office at Willson School.