

I authorize Homewood City Schools to deduct funds from my monthly payroll to support the Homewood City Schools Foundation. Please return this form to the Payroll Department at the Homewood Schools Central Office.

Name: \_\_\_\_\_  
(please print)

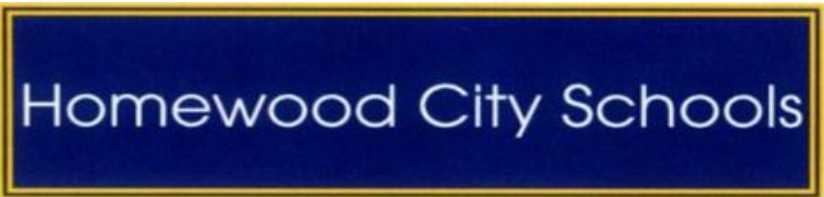
Signature: \_\_\_\_\_

School: \_\_\_\_\_

Amount: \$\_\_\_\_\_ per month      One-time Donation: \$\_\_\_\_\_

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

All donations to the Foundation are tax deductible as it is a 501-(c)(3) non-profit organization. Tax ID 63-1132466.



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