



Payroll Deduction Form

Thank you for your support

Please complete and send form to the Okanagan College Foundation office, KLO Campus.

Gift Amount:

(please check amount)

- \$ 1000 per year (\$ 38.46 per bi-weekly pay period)
- \$ 500 per year (\$ 19.23 per bi-weekly pay period)
- \$ 250 per year (\$ 9.61 per bi-weekly pay period)
- \$ 100 per year (\$ 3.84 per bi-weekly pay period)
- \$ 50 per year (\$ 1.92 per bi-weekly pay period)
- Other \$ _____

Payment:

I hereby authorize a payroll deduction of \$ _____ bi-weekly one time, effective _____
I understand that this bi-weekly deduction will continue until revoked or changed in writing by myself and that my donation will be reported as a charitable donation on my T4 each year.

Gift Designation:

- Where the need is greatest
- Scholarships and Bursaries
- Okanagan College Endowment
- Libraries
- Other – please indicate Specific Award, Faculty, Campus, Subject, Department or Project: _____
- Capital Projects:
 - Centre for Learning (Kelowna)
 - Centre of Excellence (Penticton)
 - Trades Training Centre (Salmon Arm)
 - Other _____

Donor Information:

Name: _____ *(as you wish it to appear in printed materials)*

Employee ID# _____

Address: _____ City _____

Prov: _____ Postal Code: _____

Telephone: Day () _____ Evening () _____

Preferred Email: _____

Signature: _____ Date: _____

- I wish to remain anonymous.
- Please send information about:
 - Including Okanagan College in my estate planning
 - Creating a student award
 - Gifts of shares / insurance / property

*Please return your completed donation form to Okanagan College Foundation • 1000 KLO Road • Kelowna, BC • V1Y 4X8
Phone: 250-862-5630 • Toll Free: 1-888-650-6968 • Facsimile: 250-862-5627*

www.okanagancollegefoundation.ca