



## Salt River Community Children's Foundation

A Foundation of the Salt River Pima-Maricopa Indian Community

Phone: (480) 362-7906 | E-mail: [srcsf@srpmic-nsn.gov](mailto:srcsf@srpmic-nsn.gov)

<https://www.srpmic-nsn.gov/community/foundation>

### DONOR INFORMATION

Name	<input type="text"/>		
Billing Address	<input type="text"/>		
City	<input type="text"/>	Zip	<input type="text"/>
Phone	<input type="text"/>	Alt. Phone	<input type="text"/>
Department	<input type="text"/>		
E-Mail	<input type="text"/>		

### PLEDGE INFORMATION

Automatic Payroll Deduction ☐ \$5.00 ☐ \$10.00 ☐ \$15.00 ☐ \$20.00 ☐ Other \_\_\_\_\_

Check	<input type="text" value="Check #"/>
Charge a one-time deduction	<input type="text" value="Amount \$"/>
Employee Signature	<input type="text"/>
Printed Employee Name	<input type="text"/>

☐ I wish to remain an anonymous donor

### ACKNOWLEDGEMENT INFORMATION

By Signing, I hereby authorize the Salt River Pima-Maricopa Indian Community Payroll Office to make an automatic payroll deduction, in the amount specified above, to the Salt River Community Children's Foundation (SRCCF). Furthermore, I understand that I may amend or cancel this automatic payroll deduction at any time by providing a written statement to the Payroll Office asserting the desired changes:

Signature	<input type="text"/>
Date	<input type="text"/>

Please make checks, corporate matches, and other gifts payable to:

Salt River Community Children's Foundation  
10,005 E Osborn Rd.  
Scottsdale, AZ 85256