



Singing River Foundation

Supporting a Healthier Coast

Payroll Deduction Authorization Form

Required Information

Name: _____ Employee ID#: _____

Address: _____ City: _____

State: _____ Zip code: _____

By signing below, I authorize Singing River Health System to deduct \$__ every pay period.

Signature: _____

- I wish to have my gift remain anonymous.
- I am interested in volunteering for Foundation events.

Thank you for supporting a healthier Coast!

Please return completed form to Human Resources or to Foundation. Can be faxed to **228-818-4014** or scanned and emailed to ***SingingRiverFoundation@mysrhs.com***.
For questions, please call **228-818-4011**.

Singing River Health System Foundation is a registered 501 (c)(3) organization with a tax identification number of 64-0864350. All gifts to Singing River Health System Foundation are tax deductible to the full extent allowed by law.