 **Dollars for DEF Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Community Unit School District #428 Staff Members,**

**On behalf of the DeKalb Education Foundation, I hope that the 2014-2015 school year is going well for you!**

**The DeKalb Education Foundation is in our 27th year supporting the district staff and students. Each year, our DEF volunteer board members work diligently to raise money through fundraising activities so that we can fund grants from YOU! The grants help to enrich and supplement district curriculum that the district does not provide. We hope to increase the amount of funds raised each year, thus increasing the number of grants funded!**

**We are offering you the opportunity to participate in the DOLLARS FOR DEF PROGRAM, an automatic payroll deduction program. If each staff member donated $3 per paycheck, that number would look like $62,064 for the year! If you are currently enrolled in this program, we thank you for your generosity and support. If you are not currently enrolled, we encourage you to join forces with other staff members to see what your dollars can do!**

**To participate in the DOLLARS FOR DEF PROGRAM, please complete the information at the bottom of this letter. Mail the information to Bev Stone, Payroll Coordinator, at the Education Center. Deduction will begin once this information is received from you.**

**Sincerely,**

**Melissa Beck, DEF Secretary**

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**I authorize DeKalb CUSD #428 to deduct:**

**(Please indicate amount) \_\_\_\_$5 \_\_\_\_$3 \_\_\_\_$1 Other $\_\_\_\_ One lump sum $\_\_\_\_**

**Deductions will begin once Bev Stone receives this deduction form from you with your specified contribution for 24 paychecks or one lump sum to the DeKalb Education Foundation.**

***(Charitable payroll deductions for 501(c)3 organization are not calculated on a pre-tax basis. Please consult your tax advisor about tax deductibility of this contribution on your personal income taxes.)***

**I understand that this deduction will continue until I notify Bev Stone or appropriate District staff member, in writing, that I wish to discontinue deductions.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Signature (required) Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name (required)**