



Employee Relief Fund -- Voluntary Donations Form

Employee Name: _____

Employee # _____

Title: _____

Work Location: _____

Option A

☐ I would like to participate in voluntary donations to the Arc Mercer Employee Relief Fund through a **regular payroll deduction**.

I agree to voluntarily contribute the following amount **per pay**:

☐ \$5.00 ☐ \$10.00 ☐ \$20.00 ☐ Other _____

Option B

☐ I do not want to contribute through a regular payroll deduction, but would like to make a **one-time** donation to the Arc Mercer Employee Relief Fund in the amount of \$ _____.

Enclosed is my check payable to **Arc Mercer Employee Relief Fund** for the above amount.

Employees may discontinue contributions via regular payroll deductions at any time, by submitting a written request to Human Resources. Contributions will be discontinued by the next payroll from the date the written request is received.

Employees may make as many one-time donations as they wish.

Employee Signature

Date

Approved by Human Resources

Date