



Central Oregon Police Chaplaincy

"Serving the Hearts & Minds of Central Oregon's First Responders"

PO Box 1898 * Redmond, OR 97756 * (541) 322-2960

TO WHOM IT MAY CONCERN:

I, _____, wish to have \$_____ per month taken out of my check in support of the Central Oregon Police Chaplaincy, Tax ID# 93-1244225.

I would like to begin this deduction on _____ (date) and continue until I discontinue the order in writing.

Signature

Name (Please Print)

Date

(Please return this form to the Personnel Office of your respective agency.)