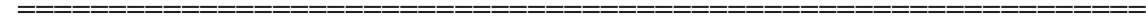


**AUTHORIZATION AGREEMENT FOR ELECTRONIC PAY STUB
SUBMISSION
CHILDREN'S ONCOLOGY CAMP
FOUNDATION**

CHILDREN'S ONCOLOGY CAMP FOUNDATION is providing electronic access to all employees who receive their paychecks by direct deposit. You will have this access via a secure portal. Upon signing up you will have access to any future pay stubs as well as your Form W-2 at year end.



I hereby authorize CHILDREN'S ONCOLOGY CAMP FOUNDATION to provide my pay stub electronically to my E-mail address provided below. I understand that once I sign up for electronic pay stubs, I will continue to receive them in this format until I notify CHILDREN'S ONCOLOGY CAMP FOUNDATION in writing.

EMPLOYEE NAME _____
(please print)

EMPLOYEE SIGNATURE _____

E-MAIL ADDRESS: _____

DATE: _____

Return this form to the Payroll