

Grande Prairie Regional Hospital Foundation  
10409 98 St  
Grande Prairie, AB  
T8V 2E8

Re: Withdraw from Employee IMPACT Club.

**To whom it may concern,**

This letter is to advise you that I, \_\_\_\_\_, as an AHS employee, am terminating my pay period contribution of \$\_\_\_\_\_ to the Grande Prairie Regional Hospital Foundation. Please change my records to accurately account for this termination of my directive.

My employee ID is \_\_\_\_\_.

My Record Number which had the deduction is \_\_\_\_\_.

Sincerely,

\_\_\_\_\_  
*Please print employee first and last name.*

\_\_\_\_\_  
*Signature of employee.*

Date of signing \_\_\_\_\_

To complete your withdrawal, please print this letter, sign and return to the Foundation via email [info@gphospitalfoundation.ca](mailto:info@gphospitalfoundation.ca) or bring it to the Foundation office.

If you require support, please call the Foundation office at 780-538-7583.