

CUKC EMPLOYEE GIVING FORM

Name: _____ **Alumni:** Yes No
Street: _____ **City:** _____ **State:** _____ **Zip:** _____
Email: _____ **Phone:** _____ **Birthday:** _____

Name(s) as you would like it to appear in the annual report of donors: _____
I prefer that my gift is anonymous and do not wish for my name to be published.

STEP 1: MY COMMITMENT

Equal installments of \$ _____ deducted from each paycheck totaling \$ _____ per calendar year
I would like this deduction to continue until I notify the CUKC to stop.
One payment of \$ _____, deducted from my paycheck in _____ (month) of _____ (year).
I prefer to make an immediate one-time gift of \$ _____

STEP 2: MY GIFT DESIGNATION

My gift is to be used as follows (*please choose one of the following options*):
CUKC Annual Fund (Area of greatest need). Amount: \$ _____
Existing Scholarship(s): _____ Amount \$: _____
_____ Amount \$: _____

STEP 3: MY GIFT FULFILLMENT

I prefer to fulfill my commitment as stated above under STEP 1.

CREDIT CARD PAYMENT

Fill out information here **or** make your gift online now at:
<https://www.cleveland.edu/alumni/cleveland-foundation-giving/annual-giving-fund/>

Credit Card: Visa MasterCard Amount \$: _____
CC#: _____ Exp. Date: _____ CVS: _____

I authorize CUKC to initiate a charge to the above-mentioned credit card in the indicated amount.

Signature: _____
Print Name: _____

Signature _____ Date _____

Send to: Jennifer Sullivan in the Advancement Department at jennifer.sullivan@cleveland.edu