

Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Are you a UConn alumnus/a?  Yes  No

School/College: \_\_\_\_\_ Class Year: \_\_\_\_\_

**Employment Information**

UConn Dept.: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work E-mail: \_\_\_\_\_

My spouse/partner's employer will match my/our gift (if checked, please enclose the matching gift form). To find out if your spouse/partner's employer matches gifts made to UConn, visit [matchinggifts.com/uconn](http://matchinggifts.com/uconn)

**DESIGNATION OF YOUR GIFT**

DEI Fund

The Fund for UConn (#13000)

Students First Fund (#22522)

Sustainability

Other: \_\_\_\_\_

*A comprehensive list of funds can be found at [www.foundation.uconn.edu/give-now](http://www.foundation.uconn.edu/give-now)*

**METHOD OF PAYMENT (REQUIRED)**

*Please choose one of the three options.*

 **Option 1 – PAYROLL DEDUCTION**

Employee #: \_\_\_\_\_

1. Please deduct the following dollar amount continuously each pay period:

\$2  \$5  \$10  \$15  \$20  \$25  \$40 Other \$ \_\_\_\_\_

Start my deduction:  Immediately  On this date: \_\_\_\_\_

2. I want to increase my current payroll deduction to the following dollar amount: \$ \_\_\_\_\_.

3. I would like to donate \$ \_\_\_\_\_ per pay period until a total of \$ \_\_\_\_\_ is reached.

*Payroll deductions will begin within 30 days unless you state a later date. Deductions will continue until you call the UConn Foundation at (860) 486-5000.*

**Required Signature:** \_\_\_\_\_

 **Option 2 – CHECK**

A check in the amount of \$ \_\_\_\_\_ is enclosed.

*(Please make check payable to UConn Foundation, Inc.)*

 **Option 3 – CREDIT CARD**

Give online at <https://www.foundation.uconn.edu/give-online/>

I/we wish this gift to be anonymous.

*If you choose to be anonymous, your name will be excluded from a public donor list that the UConn Foundation provides to the state of Connecticut annually under state law. The list includes donor name only. No other gift details are included.*

I choose to waive all athletics priority seating points and other related benefits associated with this gift.

*For Athletics donors only: If you choose to waive athletics priority seating points and other related benefits, your gift may be deductible as a charitable gift for federal income tax purposes up to 100 percent or the maximum allowed by federal law. Consult your tax advisor. I have made a provision for UConn in my estate plans.*

This gift is being made in honor of in memory of

Name: \_\_\_\_\_

Send notification to: \_\_\_\_\_

**Questions?**

Email [annualgiving@foundation.uconn.edu](mailto:annualgiving@foundation.uconn.edu) or call (860) 486-5000.

## **Thank You for Giving**

RETURN TO

The UConn Foundation, Inc.

Attention: Faculty and Staff Giving, Madeline Sanzo

2390 Alumni Drive Unit 3206

Storrs, Conn. 06269-3206

Your gift will be received by The University of Connecticut Foundation, Inc., a Connecticut non-profit and a 501(c)(3) tax exempt organization that exclusively benefits UConn. All contributions are subject to certain administrative fees that support Foundation operating expenses and other priorities determined by the University unit receiving the gift. Donors have the right to request that gifts remain anonymous, including no public disclosure in the annual list of donors provided to the State of Connecticut under state law. If you do not wish to receive future fundraising communications supporting UConn Health, please contact us and we will honor your request not to receive fundraising communications from us after the date we receive your request. You may contact us or obtain a copy of our financial report at 2390 Alumni Drive, U-3206, Storrs, CT 06269, 800-269-9965, or [www.foundation.uconn.edu](http://www.foundation.uconn.edu). The Foundation is registered to solicit charitable contributions with the appropriate governing authorities in all states requiring registration. REGISTRATION WITH A STATE AGENCY DOES NOT CONSTITUTE OR IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.

Residents of the following states may obtain information as indicated: CA: Official registration and financial information can be obtained from the Attorney General's Web site at <http://caag.state.ca.us/charities/>. Registration does not imply endorsement. MD: A copy of the current financial statement is available on request. Documents and information submitted under the MD Charitable Solicitations Act are available, for the cost of copies and postage, from the Secretary of State, State House, Annapolis MD 21401, 1-410-974-5534 (1-800-825- 4510 in MD). NJ: INFORMATION FILED WITH THE ATTORNEY GENERAL CONCERNING THIS CHARITABLE SOLICITATION AND THE PERCENTAGE OF CONTRIBUTION RECEIVED BY THE CHARITY DURING THE LAST REPORTING PERIOD THAT WERE DEDICATED TO THE CHARITABLE PURPOSE MAY BE OBTAINED FROM THE ATTORNEY GENERAL OF THE STATE OF NEW JERSEY BY CALLING (973) 504-6215 AND IS AVAILABLE ON THE INTERNET AT [www.nj.gov/oag/ca/ocp/charities.htm](http://www.nj.gov/oag/ca/ocp/charities.htm). REGISTRATION WITH THE ATTORNEY GENERAL DOES NOT IMPLY ENDORSEMENT. NY: NY residents may obtain a copy of our annual report by writing to the Office of the Attorney General, Department of Law, Charities Bureau, 120 Broadway, New York NY 10271. OR: Registration in no way constitutes or implies any endorsement, sanction or approval of this solicitation, its purposes, the manner in which it is conducted or the person or organization conducting it by the Oregon Attorney General. WA: This organization is currently registered with the WA Secretary of State as required by law. Registration number: 24291. Obtain additional financial disclosure information by contacting the Secretary at 1-800- 332-4483. WV: WV residents may obtain a summary of the registration and financial documents from the Secretary of State, State Capitol, Charleston, WV 25305. Registration does not imply endorsement.