Making a Donation to Emory Community Giving Is Quick and Easy!

1. Decide how much you want to give to the campaign.
2. Decide which agencies you want to support (see back of this form).
3. Complete the information on the donation form.
4. Sign and date the donation form.
5. Return signed donation form via campus mail to 2020 Emory Community Giving Campaign, 1599 Clifton Road, 3rd Floor, Room 3-444, Atlanta, Georgia 30322

- Mr.  - Ms.  - Dr.  - Other
- Employee ID/SS#

Full Name
- Division/Department Name
- Work Address
- Work Phone
- Email

Check your employer:  - Emory University  - EMORY HEALTHCARE

Choose ONLY ONE Method of Payment Below.  

[Make checks payable to Member Agency or Federation]

1. I wish to give a one-time gift of $___________ and my check is enclosed.  Do not write checks to Emory Community Giving or Emory University.

2. I wish to have $_______ deducted each pay period from 1/1/2020 to 12/31/2020

I am paid:  - Monthly (12 pay periods)  - Biweekly (26 pay periods)  - Other: Explain

Payroll to be deducted: (check one)  - Emory University  - EMORY HEALTHCARE  - The Emory Clinic (physicians only)

Choose Where You Want Your Gift to Go.

- I want my gift to be given to the following (See back of this form for Federation name and agency name and #)

Federation Name  - Agency Name/#  - Total 2020 Gift Amount $

- I want a written acknowledgment from the agency(ies) receiving my gift.  - Yes  - No

Please send acknowledgment to
- Name and Address
- Signature
- Date

(must be signed for payroll deduction)

Thank you!
http://communitygiving.emory.edu

PLEASE MAKE COPY FOR YOUR RECORDS