



EMPLOYEE GIVING DONATION FORM

Please return this form to JILL-ANN PEARL - Huntsman Cancer Foundation via interoffice mail or fax to 584-5913. Questions? Call 584-5816 or email jpearl@huntsmanfoundation.org

EMPLOYEE INFORMATION:

Name _____

Home Address _____

City _____ State _____ Zip _____

Cell Phone _____ Work Phone _____ Home Phone _____

Email _____

University ID # _____ Department _____

GIFT OPTIONS:

I would like to make a one time gift of \$ _____

I would like to pledge \$ _____ per pay period for: _____ * Pledges are handled by
 One-year Perpetual automatic payroll deduction

I would like to reserve a brick to pave the way to cancer hope and knowledge.
 (Minimum of \$15 per pay period for one-year. Brick will be reserved upon remittance of this form and submitted for installation when half the commitment is fulfilled. A Foundation staff member will follow up with you to discuss what you would like engraved on your brick.)

GIFT DESIGNATION:

- Area needed most _____
- Education & Outreach _____
- Patient Care & Services (i.e., financial assistance and wellness) _____
- Capital Expansion (The Primary Children's & Families' Cancer Research Center at Huntsman Cancer Institute) _____

PAYMENT METHOD:

I authorize payment through payroll deduction as specified.

I would like to make a one-time donation, my check is enclosed.
 (Please make checks payable to Huntsman Cancer Institute)

I would like to make a one-time donation, please charge my credit card.

MasterCard Visa American Express Discover

Card # _____ Exp. _____

Signature _____ Date _____

(Required for credit card & pledge donations. Typed name is acceptable)

Thank you for making a difference with your support!
 YOUR DONATION IS 100% TAX DEDUCTIBLE