

Return to: **The University of Connecticut Foundation, Inc.**
Attn: Annual Giving
2390 Alumni Drive, Unit 3206
Storrs, CT 06269-3206
860-486-1173



Thank you for giving . . . *Close to Home*

Name: _____	Home Phone: _____
Address: _____	Work Phone: _____
_____	Email: _____
City: _____	Are you an UConn alumnus/a? <input type="checkbox"/> yes <input type="checkbox"/> no
State: _____ Zip: _____	School/College: _____ Class year: _____

Designation of Your Gift - (required section - see reverse side for more fund options)

OECH00

- The Fund for UConn – Areas of Greatest Need (#13000)**
- School/College: _____
- General Scholarships (#28070)
- Other (see reverse): _____
- Students First Fund (#22522)
- Homer Babbidge Library (#20306)

Other Information

- I wish for my/our gift to remain anonymous.
- I have made a provision for UConn in my estate plans.
- My spouse/partner's employer will match my/our gift – please enclose the matching gift form.
To find out if your spouse/partner's employer matches gifts made to UConn go to www.matchinggifts.com/uconn.
- My partner/spouse is an UConn alumnus/a. Name: _____ Class year: _____ School/College: _____
- My partner/spouse should receive joint credit for this gift.
Partner/Spouse's name: _____
Title First Middle Last Suffix
- This gift is being made in honor of/in memory of: _____
Send notification to: _____

Method of Payment (Please choose 1 of the 3 options below)

1. PAYROLL DEDUCTION (see reverse side for sample calculations) **EMPLOYEE#** _____

- Please deduct the following dollar amount continuously each pay period:
 ___ \$2 ___ \$5 ___ \$10 ___ \$15 ___ \$20 ___ \$25 ___ \$40 _____ (Other)

Please start my deduction: immediately **OR** on the following date: _____.

- I want to increase my current payroll deduction to the following dollar amount: \$ _____ per pay period.
Please note that payroll deductions will rollover from year to year until you contact the UConn Foundation at 486-1173.

Required Signature: _____ **Date:** _____

2. CHECK in the amount of \$ _____ is enclosed. (made payable to The University of Connecticut Foundation, Inc.)

3. CHARGE MY CREDIT CARD for a total of \$ _____ **OR**

I would like to pay in installments of \$ _____ over _____ months, beginning _____.

- VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Account Number: _____ Expiration Date: ____ / ____ Code* _____

*the last 3 or 4 digit number located on the back of card or on the front right for AMEX.

Required Signature: _____ **Date:** _____

When giving *Close to Home* consider using payroll deduction!

Sample Payroll Deductions

Deduction Per Pay Period	Estimated Yearly Impact
\$ 2.00	\$ 52.00
\$ 5.00	\$ 130.00
\$ 7.50	\$ 195.00
\$10.00	\$ 260.00
\$12.50	\$ 325.00
\$15.00	\$ 390.00
\$17.50	\$ 455.00
\$20.00	\$ 520.00
\$22.50	\$ 585.00
\$25.00	\$ 650.00
\$30.00	\$ 780.00
\$40.00	\$1,040.00
\$50.00	\$1,300.00

If you have questions, need more information, or wish to support an area that is not listed, please contact the Annual Giving Office at the UConn Foundation (860) 486-1173 or annualgiving@foundation.uconn.edu

We are always looking for volunteers to serve on the

***Close to Home* committee.**

Let us know if you are interested!

Additional Gift Designations

Please note the fund name and account number when selecting one or more of the following funds:

Academics

College of Agriculture & Natural Resources Dean's Fund (#20016)
 School of Business Dean's Fund (#20090)
 Neag School of Education Dean's Fund (#20525)
 School of Engineering Dean's Fund (#20228)
 School of Fine Arts Dean's Fund (#20255)
 College of Liberal Arts & Science Dean's Fund (#21438)
 School of Nursing Dean's Fund (#20522)
 School of Pharmacy Dean's Fund (#28003)
 School of Social Work Dean's Fund (#20548)
 Graduate School (#20562)

Campus Improvement

Campus Sustainability Fund (#22701)
 Campus Security (#21703)

Museums & Performing Arts

Ballard Puppetry Museum (#20262)
 William Benton Museum of Art (#21752)
 Connecticut Repertory Theatre (#20357)
 Jorgensen Center for Performing Arts (#22531)
 Museum of Natural History (#20120)

UConn Health Center

Fund for UConn Health (#21263)
 Neag Comprehensive Cancer Center (#21308)
 Cardiovascular Signature Program (#22227)

Athletics

Athletics Unrestricted (#21020)

Alumni Association

Alumni Association Donations (#21817)

Important Information

Your gift will be received by The University of Connecticut Foundation, Inc., a Connecticut non-profit that exists exclusively to benefit UConn by raising and administering private gifts and philanthropic grants to support the University's pursuit of excellence in teaching, research and public service. All contributions are used to support the donor's intention and are subject to certain administrative fees that are used to support Foundation operating expenses as well as other priority needs determined by the School, College or unit receiving the gift. For additional information please visit our website at www.foundation.uconn.edu. Donors to the Foundation have the right to request that their gifts remain anonymous.

You may obtain a copy of the Foundation's financial report, or you may contact us at 2390 Alumni Drive, U-3206, Storrs, CT 06269, or 800-269-9965. The Foundation is exempt from registration as a charitable organization in a number of states and jurisdictions. If the Foundation is required to register and comply with state laws related to charitable contributions, the official registration, documents and financial information can be obtained from that state's Attorney General, Secretary of State, or other charitable solicitation licensing agency. For additional state contact information, please visit our website. **REGISTRATION WITH A STATE AGENCY DOES NOT CONSTITUTE OR IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THAT STATE.**