CHARITY CHOICE 2019

Name:			
Employee ID:	Email:		
Phone: (w)	(h)		
School:	Department:		
Federation (please circle): United Way 501(c)(3)* (Optional) Member Agency: _	-		•
*If independent 501(c)(3) agency, please	complete the following:		
Name:			
Address:			
City:	State:	ZIP:	
FOR PAYROLL DEDUCTION (Deduction Monthly Payroll Deduction Amount: \$ Total Annual Deduction Amount: \$ Signature:	Nun	nber of Months:	
FOR PAYMENT BY CHECK			
Amount Paid by Check: \$			
Make check payable to your chos Ohio), or the name of the indepen		ay, Community	Shares, EarthShare
Send check to:			
Charity Choice Crawford Hall 320 10900 Euclid Ave Cleveland, OH 44106-7047			

If you itemize your charitable contributions, you must date and retain a copy of this form for IRS purposes. Nothing has been given in return for this contribution. Please consult your tax advisor for more information.

Thank you for making a donation to the Charity Choice Campaign 2019! Your contribution demonstrates your personal commitment to the welfare of the Greater Cleveland community. Payment deductions will begin in January 2019. We hope that you endorse your commitment to your fellow co-workers and encourage them to be active participants in this year's campaign. Through our collaborative participatory effort, the Case community will prove its dedication to our families, neighbors, friends, children, colleagues, and peers in the city of Cleveland.