



College of William and Mary / VIMS
The Combined Virginia Campaign

Name (Last, First, MI)	
Department	
Banner ID ~~ OR ~~	
Social Security Number	

STEP ONE: Please choose the method by which you wish to make your donation.

1. Payroll Deduction (January 1 – December 31)	Annual Total	2. Cash or Check	Annual Total
\$ _____ per 24 pay periods (semi-monthly) =	\$ _____	Cash (attach)	\$ _____
\$ _____ per 18 pay periods (9 month faculty) =	\$ _____	Check (make payable to CVC and attach)	\$ _____

3. Credit Card		Annual Total	4. Stock Gift		Annual Total
Type	MC Visa AMEX Discover	\$ _____	I wish to make a gift of stock. Please contact me at:		\$ _____
Name	_____				
Number	_____		Exp	_____	

STEP TWO: Choose whether or not you wish to designate your gift to a specific charity. Consult the [CVC Charity Listing](#) for names and code numbers of CVC Approved charities:

I do not wish to designate a specific charity.

I wish to designate one or more specific charities:

<input type="text"/>	<input type="text"/>	_____	<input type="text"/>	<input type="text"/>	_____
Code No.	Annual Amount	Name of Charity	Code No.	Annual Amount	Name of Charity
<input type="text"/>	<input type="text"/>	_____	<input type="text"/>	<input type="text"/>	_____
Code No.	Annual Amount	Name of Charity	Code No.	Annual Amount	Name of Charity

STEP THREE: Authorize your donation, and choose whether or not to be acknowledged.

I authorize this contribution to the CVC (Signature of Employee)

Date

I wish my gift to be anonymous.

Please share my name, address, and amount of gift with the charities I have selected for acknowledgement purposes. (Address provided below.)

Street _____

City _____ State _____ Zip _____

STEP FOUR: Do not forget to print two copies of this form. Keep one for your records, sign the other, and **submit the signed copy to the Bursar's Office** at the College of William and Mary, PO Box 8795, Williamsburg, VA 23187-8795.