



Together We Can!

Your donation will provide funding to the SJECCD Foundation and the programs it supports.

Name: (Please Print) _____ Employee # _____

Address: _____

Email: _____ Phone: _____

I authorize an annual pledge of \$_____ through a payroll deduction of \$_____ per pay period, effective _____ (date) as a tax deductible donation to the SJECCD Foundation fund noted below.

This authorization will remain in effect until I notify Payroll in writing of a change.

- Greatest Need**
 Specific Program: _____

<input type="checkbox"/> New Pledge
<input type="checkbox"/> Update Pledge

Signature: _____ Date: _____

*Your gift is deductible to the extent allowable by law. The San Jose/Evergreen Community College District Foundation is a 501(c)(3) public benefit corporation. Tax I.D. No. 94-2877474.
For more information please contact the Foundation at 408.918.5144 or visit www.sjeccd.edu/foundation.*