

# WLG Legacy Founder's Fund....

*Help Create A Legacy!*



Print Form



## Maricopa Community Colleges Foundation Gift Form

I (We) wish to make a gift to the Maricopa Community Colleges Foundation in the amount of \$ \_\_\_\_\_

Name(s): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date: \_\_\_\_\_

Signatures(s): \_\_\_\_\_

The Foundation wishes to recognize those who make contributions. Unless you indicate otherwise, we will assume your permission to use your name/s, as listed above, in Foundation publications.  I/We wish to remain anonymous.

**Gift Options: (please check one)** Please see important endowment policy on the back page.

- I (We) would like my (our) gift applied to (scholarship name): \_\_\_\_\_ WLG Legacy Founder's Fund \_\_\_\_\_.  
For a list of existing scholarships please refer to <http://www.maricopa.edu/foundation/apply/index.php>
- I (We) would like to establish a new scholarship.  
If you are establishing a new scholarship, please attach the *Endowment/Restricted Agreement* form to initiate a scholarship, which can be found at <http://www.maricopa.edu/foundation/ways/index.php>
- I (We) would like my (our) gift to be unrestricted and used where there is the greatest need,  
anywhere in the district or at (please list a campus) \_\_\_\_\_
- I (We) would like more information about making a planned gift.

**Gift Payment Options:** A receipt will be sent to the address listed above.

- Check**  
Enclosed is my (our) check, payable to the Maricopa Community Colleges Foundation in the amount of \$ \_\_\_\_\_.
- My Matching Gift Form is enclosed.**  
If you or your spouse are employed by a company with a matching gift program your gift can be increased.  
Please check with your HR Department for participation status and Matching Gift Form.

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**Charge**  
I (We) wish to charge my (our) gift in the amount of \$ \_\_\_\_\_ to: please indicate one.  
 Visa     Mastercard     American Express     Discover

Account Number Including the 3-digit security code on the back of the card. 3-digit security code

\_\_\_\_\_  
Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Billing Address (if different than above): \_\_\_\_\_

Name on card: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_

- My Matching Gift Form is enclosed.**  
If you or your spouse are employed by a company with a matching gift program your gift can be increased.  
Please check with your HR Department for participation status and Matching Gift Form.

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**Pledge - External Only**  
I (We) wish to make a pledge in the amount of \$ \_\_\_\_\_.

Equal payments of \$ \_\_\_\_\_ will begin in (month/year) \_\_\_\_\_.

Please send reminders to me ( monthly     quarterly     semi-annually     annually) at the address listed above.

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**Pledge - Internal (Employees Only) via Payroll Deduction. See Back Page.**

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**My gift is of real or personal property, stocks or bonds or in the form of a bequest. Please contact me personally about making a gift of this type.**

## Pledge - Internal (Employees Only) via Payroll Deduction

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Employee ID: \_\_\_\_\_ Employee Group: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I wish to pledge \$ \_\_\_\_\_ by payroll deduction.  
 Please enter the amount per pay period from the schedule below \$ \_\_\_\_\_.

This is: (check one)

- a new payroll deduction  to replace all current payroll deductions  in addition to my current payroll deductions -  
 (use *Revision to Existing Payroll Deduction* supplemental form)

<b>Platinum</b>	<b>\$500 and above</b>	<b>Permanent Name Recognition on Plaque Displayed at District O</b> <b>District-Wide Recognition Via E-Mail from the Chancellor</b> <b>Written Recognition in the WOD Luncheon Program</b> <b>Recognition on the WLG and Foundation Websites</b> <b>Recognition Certificate Signed by the Chancellor</b> <b>Attend Community Event with Chancellor</b>  (Via payroll deduction: \$20.83 per pay period.)
<b>Gold</b>	<b>\$250 to \$499</b>	<b>Permanent Name Recognition on Plaque Displayed at District O</b> <b>District-Wide Recognition Via E-Mail from the Chancellor</b> <b>Written Recognition in the WOD Luncheon Program</b> <b>Recognition on the WLG and Foundation Websites</b> <b>Recognition Certificate Signed by the Chancellor</b>  (Via payroll deduction: \$10.42 per pay period - \$20.80 per pay pe
<b>Silver</b>	<b>\$100 to \$249</b>	<b>Permanent Name Recognition on Plaque Displayed at District O</b> <b>District-Wide Recognition Via E-Mail from the Chancellor</b> <b>Written Recognition in the WOD Luncheon Program</b> <b>Recognition on the WLG and Foundation Websites</b>  (Via payroll deduction: \$4.17 - \$10.83 per pay period.)

## Endowment Policy Information

**Endowments** are gifts to the Maricopa Community Colleges Foundation created by the donor as a perpetual source of funding support for student scholarships, program support or other designated purposes that fall within the Foundation's mission.

**Funding requirements:** A minimum contribution of \$10,000 is required before an endowment can be created; however, donors have up to three (3) years to reach that minimum level. If the endowment minimum is not reached as required, accumulated contributions will either be treated as a restricted fund and fully expended as soon as practicable or combined with a compatible, already existing endowment account.

**Investment and Spending Policies:** Endowment Funds are professionally managed as part of a carefully balanced investment portfolio that includes stocks, bonds and other approved instruments. Each year, endowment funds are awarded in amounts up to 5% of a three year average of their year-end fund balances. In down markets, such calculation may invade the original corpus, in that case no funds will be made available to award. Any unspent portion of the amount available for annual distribution shall be returned to the principle balance of the endowment.

## Please return this form to:

Maricopa Community Colleges Foundation  
 2419 West 14th Street - Tempe, AZ 85281  
 Phone: 480-731-8400  
 Fax: 480-731-8411  
 email: foundation.giving@domail.maricopa.edu

The Maricopa Community Colleges Foundation is a 501 (c) (3) tax exempt organization.  
  
 All gifts to the Maricopa Community Colleges Foundation are tax deductible to the extent provided by law. Please contact your tax advisor for details.

