



2022 Employee Giving Campaign

Give online at www.capitalcc.networkforgood.com/

CCC employees know the needs of our students best and give to ensure these needs are met

Name _____
 Home Address _____
 Phone _____ E-mail _____
 _____ Full-Time Staff _____ Part-Time Staff _____ Faculty _____ Adjunct Faculty
 Are you a graduate of CCC ? _____ Yes Graduation Year: _____

I wish to direct my gift to.....

- Emergency micro grants to address immediate student needs
- Capital Cares Food Pantry
- Equity Center
- Mentoring Program
- Hartford Heritage Program

Other (please specify program or fund) _____

Payroll Deduction

- YES. I wish to contribute through payroll deduction to the CCC Foundation.

I authorize the following amount to be withheld from my Capital Community College pay as a tax-deductible gift to the CCC Foundation. (Minimum donation amount per pay period is \$2)

- Deduct recurring gifts of \$ _____ each pay period. (gifts of \$10 or more per pay period will receive a CCC Fleece Jacket)
- Change my current payroll deduction to \$ _____ each pay period
- Deduct a one-time gift of \$ _____ from my next pay check
- I authorize Capital Community College to deduct the above amount from my paycheck.

Check or Cash Gift

- Enclosed is my gift of \$ _____ (payable to the CCC Foundation)

Credit Card

Frequency \$ _____ monthly for _____ months OR \$ _____ One-time charge

Type of Card: American Express MasterCard Visa Name on Card _____

Account Number _____ Expiration Date _____ CID _____

Name on Card _____

Billing Address (if different from above) _____ City/town _____ State _____ Zip _____

Signature _____ Date: _____ Make my donation anonymous

Thank You
 Return this form to
 Capital Community College Foundation | Office of Institutional Advancement
 950 Main Street | Hartford, CT 06103 | Telephone: 860-906-5102 | E-mail:
liturrino@ccc.comnet.edu