ERIE GIVES CHECK CONTRIBUTION FORM

Please make checks payable to The Erie Community Foundation and kindly deliver to the Foundation (459 West 6th Street, Erie, PA 16507) with this completed form no later than August 9, 2021.

ALL INFORMATION IS REQUIRED

Erie

Gives

| Donor Name(s): | | | | |
|------------------------------------|------------------------|-----------------------|---------|-------|
| Address: | | _ City: | _State: | .Zip: |
| Phone: | Email: | | | |
| Check Number: | Contribution total: \$ | S | | |
| Please list how you wish to be ide | - | xample: John & Jane D | | |

Does your employer match donations? OYes ONo Company Name:_

Please note, the employee is responsible for completing the employer's company match paperwork.

| | Erie Gives Nonprofit Name All nonprofits below must currently be listed on the Erie Gives website. | Gift Amount \$25 minimum |
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