

Get involved. Show your support. Influence the future.

Join your VCU Health colleagues by supporting the Black & Gold & You campaign. Make a gift to the VCU Health area that matters the most to you. The goal is participation. Gifts of any amount are appreciated.



VCUHealth™

BLACK & GOLD & YOU



I am a VCU Health donor!

Please designate my gift as follows:

- VCU Health Capital Expansion Plan Fund (M50320)
- The Rainbow Society Fund (M50489)
- The following school, department, program or scholarship:

Please return this form to:
VCU Office of Annual Giving, Box 843042, Richmond, VA 23284-3042

**Payroll deduction should begin within two pay cycles.*

NAME

EMAIL

E-NUMBER

ADDRESS

CITY

STATE

ZIP

Payroll deduction*

- I am making my gift through a new payroll deduction. I pledge \$ _____ at the rate of \$ _____ per pay period beginning _____.

SIGNATURE (REQUIRED)

DATE

Outright gift

- I am making a one-time gift of \$ _____. Please make checks payable to **MCV Foundation**.
- I am using my credit card (VISA, MasterCard, Discover, AmEx).

CREDIT CARD NUMBER

EXPIRATION

CVV

SIGNATURE (REQUIRED)

DATE

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