



AAUW California Special Project Fund Designation Notification Form For Matching Funds, Designated Funds, & Grants

This form is to be used to notify the **AAUW CA Special Project Fund (AAUW CA SPF)** of donations that will be sent directly to the AAUW CA SPF. The Project is to complete the form and submit it on behalf of a corporation, foundation, or donor who are requesting either matching funds from their employer, designated funds from another entity such as a personal family foundation or investment fund, or funds coming from a grant to the project. These donations must be for a project/scholarship approved to use the AAUW CA SPF as its non-profit fiduciary agent.

AAUW CA SPF must have this Designation Notification Form on file in order for the funds to be properly allocated to the intended project/scholarship. Funds received without a form on file will be held by AAUW CA SPF in the general account until a Designation Notification Form is received. If the designated project or scholarship qualifies for interest allocation from AAUW CA SPF, no interest will accrue or be allocated until the form is received. Interest allocation will begin when the funds are correctly posted to the project/scholarship on AAUW CA SPF's books.

Donation Information

Donor Name: _____

Address: _____

Phone Number: _____

E-mail Address: _____

AAUW Branch to be credited with donation: _____

Name of Project/Scholarship to receive funds: _____

If the funds are for Tech Trek, name of the camp to receive the funds: _____

Please check: one-time donation; recurring donation

If recurring, please check: monthly quarterly other: (specify) _____

Name of third party entity that will be issuing the monies (e.g. bank, foundation, corporation):

Amount of donation to be received from the third party: \$ _____

Note: All checks must be written to **AAUW CA SPECIAL PROJECT FUND** or **AAUW CA SPF**.

Is this a matching gift (e.g. employer matching gift)? yes no

If yes, please provide the following information about the personal donation that is tied to this matching gift:

Personal Donation: _____ payroll deduction _____ personal check to AAUW CA SPF--please provide the following data (frequently employers ask us to verify this information before issuing the matching funds):

Amount _____ Date _____ Check Number _____

If this donation will require verification of volunteer hours in order for the donation to be made please attach detailed documentation of the volunteer hours, signed by your work supervisor or AAUW branch officer.

Questions should be sent to: spf-ca.finance@aauw.net

Submit this form and documentation via USPS to: **AAUW CA Special Projects Fund**, Attention: **President**, PO Box 160067, Sacramento, CA 95816-0067. E-mail: spf-ca.finance@aauw.net