



ASSOCIATE MATCHING PROGRAM

2018 PAYROLL DEDUCTION FORM

My Information

All personal information will be kept confidential.

Workday ID*

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Mr./Mrs./Ms.	First Name	M.I.	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Home Address	Apartment Number	City/Town
<input type="text"/>	<input type="text"/>	<input type="text"/>

State	Home Zip Code		Daytime Telephone Number		Work Zip Code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Email

Work Site (City & State)

My Choice

Please select one or more of the following organizations.

National Non-Profits

- [American Cancer Society](#)
- [American Heart Association](#)
- [American Lung Association](#)
- [American Red Cross](#)
- [Juvenile Diabetes Research Foundation](#)
- [Leukemia & Lymphoma Society](#)
- [Science Olympiad](#)
- [St. Jude Children's Research Hospital](#)
- [Susan G. Komen for the Cure](#)

Local Non-Profits

- [Ann & Robert H. Lurie Children's Hospital of Chicago](#)
- [Children's Healthcare of Atlanta](#)
- [Children's Hospital of Philadelphia](#)
- [Gloucester County Special Services Education Foundation](#)
- [March of Dimes - Fresno, CA](#)
- [National MS Society – Los Angeles, CA](#)
- [Ronald McDonald House – Camden, NJ](#)
- [SciTech Hands on Museum – Aurora, IL](#)
- [Scripps Research Institute](#)
- [SickKids Hospital](#)
- [Sickle Cell Association of New Jersey](#)
- [St. Joseph's Hospital of Atlanta](#)
- [The Museum of Science and Industry](#)
- [Valley Children's Hospital – Madera, CA](#)

My Gift

- PAYROLL DEDUCTION:** I want to contribute the following per pay period for the remaining pay periods this year:
 \$5 \$25 \$50 \$100 Other _____
- CANCEL:** I want to cancel my current contributions.

Please sign and date: _____
SIGNATURE DATE

Items to Note

- Once your form is completed, please fax it to 484.881.5653 or e-mail to: payroll_NA@vwr.com. It will take approximately 2-3 weeks to get set up/cancelled in the payroll system.
- None of the organizations listed above provides any goods or services as whole or partial consideration for contributions.
- Associates will have to reelect their payroll deduction annually. If you choose to contribute to the Associate Matching Program in 2018, you will need to submit a new contribution form.

*Please log in to Workday. Your Workday ID is the number next to your name.