

All charitable gifts to Peralta Community College District are accepted and administered by the Peralta Colleges Foundation a non-profit corporation under the Internal Revenue section 501(c)(3) and an auxiliary of the Peralta Community College District. Our federal tax number is 23-7091547.

Peralta Colleges Foundation makes it possible for you to educate and strengthen the community through charitable gifts that help support scholarships, academic programs and teaching excellence.



Place
Stamp
Here

Peralta Colleges Foundation
PO Box 31985
Oakland, CA 94604

Yes! I want to help Peralta Colleges Foundation strengthen education and workforce development programs in the Peralta Community College District:

College of Alameda, Berkeley City College, Laney College and Merritt College

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Cell Phone _____

Email _____

Employer _____

MAKE YOUR GIFT ONLINE:

www.peraltafoundation.org/contribute

Double the impact of your gift.

Contact your employer's Human Resources office about a matching program.

Peralta Colleges Foundation primarily seeks unrestricted gifts to support its programs and activities on behalf of the students, faculty and programs of the four colleges that comprise the Peralta Community College District.

- \$2500 \$1000 \$500 \$250 \$100 Other _____

To support the following:

- ___ I wish to make an unrestricted gift that will assist Peralta Colleges Foundation in supporting the four colleges of the Peralta Community College District.
- ___ I would like my gift to support the Peralta Colleges Foundation scholarship programs.

PAYMENT INFORMATION

- Check made payable to Peralta Colleges Foundation enclosed
- I made my gift online at www.peraltafoundation.org/contribute
- Please charge my: Visa MasterCard Discover Card

Card Number

Signature (NAME AS IT APPEARS ON CARD) _____

5 Digit Zipcode

3 Digit Security Code

Exp Date

MONTH YEAR

Automatic Payment by Credit Card:

I authorize the PCF to charge \$ _____ to the above credit card each month using the information and signature provided above.

Automatic Payment by Bank Authorization:

I authorize my bank to make monthly payments in the amount of \$ _____ from my checking account to PCF.

(Please provide your signature above and voided check so we may establish this arrangement with your bank.)

Signature for bank authorization Date

I would like additional information about

- Leaving a gift in my will or trust to Peralta Colleges Foundation
- Starting a scholarship fund
- Volunteer opportunities