

## Yes! I am committed to empowering students, helping build a thriving Philadelphia, and supporting educational opportunities for all!

## **DONATION FORM**

Name:	<b>J#</b> (if applicable):	
Mailing Address:		
City:	State:	_ Zip:
Phone: () Email:		
<b>GIVE ONLINE:</b> If you prefer to make a gift via credit card, visit <b>ccp.edu/</b> gift and have an immediate impact.	<b>'donate</b> to make yo	ur one-time or recurring
ENCLOSED IS MY GIFT OF: (make checks payable to Community College of Philadelphia Foundation)	on)	
\$1,000\$500\$250\$75 Other \$		
PLEASE DESIGNATE MY GIFT TO: (Gifts are unrestricted unless designated unless designated)  Unrestricted/Greatest Need  Scholarships  Programs  Facilities, Furniture, Equipment  Other:  My gift is anonymous.  Name(s) under which donation should be listed:		
EMPLOYEE PAYROLL DEDUCTION: Visit foundation.ccp.edu/employee	egiving	
MATCHING GIFT:  Make twice the impact by taking advantage of your corporate matching Visit foundation.ccp.edu/matching-gifts to check if your employer will Form enclosed.  Form will be sent.		on.
(Continued)		
TRIBUTE GIFTS:		



☐ In honor of/☐ In memory of
Please send acknowledgement of my gift to:
Name:
Address:
PLANNED GIVING
☐ I have included the College in my will, or as a beneficiary in my retirement account, insurance policy, DAF, or other asset.
☐ I would like more information on including the College as a beneficiary in my estate plans.
For gifts of securities, pledges and other inquiries, please email us at <a href="mailto:foundation@ccp.edu">foundation@ccp.edu</a> .  Contributions are tax deductible to the extent provided by law.
If you are an alumnus/a or former student, please complete the following:
Year(s) attended Community College of Philadelphia:
Program of Study/Degree:

Please send any questions to foundation@ccp.edu.

Please mail this form with your gift to: Community College of Philadelphia Foundation 1700 Spring Garden Street Philadelphia, PA 19130

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