

COMPREHENSIVE CAMPAIGN PLEDGE FORM

DONOR INFORMATION NOTE: Your name will appear as indicated below for reporting purposes and in all donor recognition vehicles.

Name: _____
 I/we do not want my/our name(s) to be published for reporting or donor recognition purposes.
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Home/Cell Phone: _____ Business Phone: _____
 Email: _____

CONTRIBUTION/PAYMENT OPTIONS (Check all that apply.)

My/our gift is to be used by the Community College of Philadelphia Foundation as indicated below:

<input type="checkbox"/> Main Campus \$ _____	<input type="checkbox"/> Northeast Regional Center \$ _____
<input type="checkbox"/> Scholarships Endowment \$ _____	<input type="checkbox"/> Endowed Chair \$ _____
<input type="checkbox"/> General Campaign \$ _____	<input type="checkbox"/> Other \$ _____

Naming Opportunity Requested (A representative of the Office will contact you.)

Paid in full by check payable to the Community College of Philadelphia Foundation (enclosed).

Please charge my credit card: Visa MasterCard Discover American Express

full amount of my gift my first pledge payment each pledge payment when due

Credit Card Number: _____ Exp. Date: _____
 Credit Card Security Code/Verification # _____ (Three-digit number located on back of credit card near signature line.)
 Authorized Credit Card Signature: _____

To be paid with securities. Date of transfer: _____
 Electronic Transfer Instructions: DTC #141
 Credit to FCC A/C #2107-5095 N/O Community College of Philadelphia

To be paid with real estate/other (A staff member will contact you.)

To be paid as a pledge as follows:

Year 1: \$ _____	Payment Date: _____
Year 2: \$ _____	Payment Date: _____
Year 3: \$ _____	Payment Date: _____
Year 4: \$ _____	Payment Date: _____
Year 5: \$ _____	Payment Date: _____

Total Pledge Amount: \$ _____

My gift will be matched by _____
 Matching gift form enclosed Matching gift form will be forwarded

My gift is: in memory of in honor of _____

Please send your completed pledge form to: Anne McGrath, Director of Development
 Community College of Philadelphia Foundation
 1700 Spring Garden Street, Annex – 7th Floor
 Philadelphia, PA 19130

 Donor Signature Date

 Donor Signature Date

Gifts to the Foundation are tax-deductible to the fullest extent of the law. No goods or services are provided in consideration for these gifts.