



Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

I hereby make a gift of \$ \_\_\_\_\_ to the following:

Payment Method:

Cash       Credit Card:       Visa       MasterCard  
 Discover       AMEX

Name on Card: \_\_\_\_\_

Credit Card No. \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Pledge       Please invoice

I pledge to make payments on a:

Monthly       Quarterly       Annual basis beginning  
on \_\_\_\_\_ for \_\_\_\_\_ year(s).

All donations to CCBC Foundation will be recognized in an annual publication unless otherwise requested by the donor. I would like my name to be listed as:

I would like my donation to remain anonymous.

Donor's Signature

Date

*CCBC Foundation, Inc. is a 501(c)(3) non-profit organization. Contributions are deductible to the extent allowed by law. You should consult your tax advisor. A copy of the annual report is available upon request.*

**CCBC FOUNDATION, INC.**

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