



# DONATION FORM

**YES,** I would like to support Central Piedmont Community College with a gift of \$ \_\_\_\_\_

Please use my gift for:  Greatest Need  Student Scholarships  Emergency Fund

Instructional Programs (specify department/program) \_\_\_\_\_

Faculty/Staff Development  Other \_\_\_\_\_

## GIFT INFORMATION

I would like to make a  Memorial gift  Honorary gift

In honor/memory of \_\_\_\_\_

Please notify \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## YOUR INFORMATION

Central Piedmont Affiliation:

Alumnus/a  Faculty/Staff  Student  Retiree  Parent  Trustee/Director (current or past)  Friend

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

My and/or my spouse's company matches this gift. (Please include matching gift information.)

To learn if your company offers a matching program, please visit [cpccfoundation.org/matching-gift](http://cpccfoundation.org/matching-gift).

I have included Central Piedmont in my will.

I would like information on other planned giving opportunities.

Check Enclosed: Amount \$ \_\_\_\_\_

Credit Card: Amount \$ \_\_\_\_\_  Visa  MasterCard  American Express

Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CVV# \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

To make a gift of stock or to give by phone, please call 704.330.6869.

Please print and mail your completed form to: **Central Piedmont Community College Foundation, Inc.**  
PO Box 35009  
Charlotte, NC 28235-5009