

## **Contribution Form**

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Address

City State Zip Code

Day Phone Evening Phone Email

Total Gift Amount \$

Pay by Check: Please make check payable to the OCC Foundation

AVOID completing this form by paying online. Just click on the link below: www.oaklandcc.edu/foundation/foundation/PayPalDonations.aspx

Pay by Charge: Visa MasterCard Discover Card American Express

Card Number Expiration Date Security Code

Name as it appears on card

Signature

## Please use my gift as indicated below

(If you would like to support more than one purpose with your gift, please list below)

Amount Purpose

Where most needed (Unrestricted)

\$

\$

My (or my spouse's) employer will match this gift. Employer's matching gift form is enclosed. I am an Oakland Community College alumnus.

This gift is in Honor of Memory of

Who should we notify of this contribution?

Name

Address

City State Zip

## Thank you for supporting Oakland Community College!