

Foundation for the Compton Community College District

CREDIT CARD DONATION FORM

Complete this form and submit it directly to the Bursar's Office in person or by mail. Do not email or fax this form.

Donor Information

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Donation Purpose (check one):

Annual Dues (Foundation Board Members only)

Specific Fund: _____ (e.g., Project 114 – Emergency Grants)

One-Time Charitable Donation

Specific Scholarship Account: _____ New Existing

Donation Amount: \$ _____

Credit Card Information

Card Type: Visa MasterCard Discover AMEX

Card Number: _____

Expiration Date (MM/YY): _____

Security Code: _____

Billing Zip Code: _____

Name on Card: _____

Authorization

I authorize Compton CCD Foundation to charge my credit card for the amount indicated above.

Signature: _____ Date: _____

Submission:

Deliver this completed form to the Bursar's Office:

Compton Community College District Bursar's Office (SSB, Room 161)

1111 E. Compton Blvd., Compton, CA 90221

For questions, contact: (310) 900-1600, ext. 2104

Foundation for the Compton Community College District is a tax-exempt organization tax I.D. #27-0340685. Under federal law, the deduction from federal income tax for charitable contributions is limited to the amount by which any money contributed exceeds the value of the goods or services provided in exchange for the contribution. In this instance the Foundation for the Compton Community College District provided you with no goods or services.