



Cancer Support Community East Bay
3276 McNutt Avenue
Walnut Creek, CA 94597
T :: 925.933.0107

Cancer Support Community Silicon Valley
455 North Whisman Road, Suite 300
Mountain View, CA 94043
T :: 650.968.5000

Donation Form

Name (as it appears on credit card) _____

Date _____ Home/Cell Phone _____ - _____ - _____

Address _____

City _____ State _____ Zip _____

Name[s] as you wish to be acknowledged (if different than above) _____

Enclosed is my gift of: [] \$25 [] \$50 [] \$100 [] \$250 [] \$500
 [] \$1,000 [] \$2,500 [] \$5,000 [] Other _____

My check is enclosed and payable to Cancer Support Community.

My payment is by credit card. Visa MC AmEx

Card Number _____ Expiration date ____ / ____

I'll join the Monthly Donor Circle with a monthly gift of: [] \$25 [] \$50 [] \$100 [] Other _____

Payment will be by credit card. I understand I may cancel at any time. Visa MC AmEx

Card Number _____ Expiration date ____ / ____

My gift is given: In honor of _____

In memory of _____

Send memorial/honorary acknowledgment to:

Name _____

Address _____

City _____ State _____ Zip _____

Yes, my employer will match my gift (please enclose company gift match form).

Yes, I have included Cancer Support Community in my will.

Yes, I would like information on how to include Cancer Support Community in my will.

Thank you for your support. Contributions are tax deductible to the full extent permitted by law.

Please print and complete this Donation Form and return by mail to your preferred location as listed on top of form.

You may also scan and email to aalanes@cancersupportcommunity.net.

Donations can be made securely online at www.cancersupportcommunity.net.

Cancer Support Community is a 501(c)(3) nonprofit organization with Federal Tax ID number 68-0157858.