

Los Altos Community Foundation

Thank you for supporting local community-building!



Contact Information

Mail, fax, or email
this form to:
Los Altos Community
Foundation
183 Hillview Avenue
Los Altos, CA 94022
Tel: 650-949-5908
Fax: 650-949-0807
Email:
lacf@losaltoscf.org

*Please contact me
about:*

- Planned giving
- Stock donations
- Non-cash gifts

Los Altos Community
Foundation is
recognized by the IRS
as a 501(c)(3)
nonprofit charitable
organization. All gifts
are tax deductible to
the fullest extent of
the law.

Los Altos Community
Foundation's Federal
Tax ID is 77-0273721

*Your generosity is
appreciated*

First and Last Name

Email Address

Spouse/Partner Email (if applicable)

Name(s) to use for your gift acknowledgement in LACF Annual Report

- I prefer to keep my gift anonymous. Do not list my name in the Annual Report.

Business Name (if Corporate Gift)

Street Address

City, State, Zip

Telephone Number

Please select your donation level:

- Community Supporter \$100 \$250 \$500
- Community Advocate \$1,000
- Community Builder \$2,500 \$5,000
- Pillar of the Community \$10,000 \$25,000 \$50,000
- Other Amount \$ _____

- My employer has a matching gift program.

Method of Payment

Donate Online at www.losaltoscf.org/donate

- Check enclosed, payable to Los Altos Community Foundation or LACF
- Charge to: Visa Mastercard Amex

Name on Card

Card Number

Exp. Date

CVV (3 digit security code)

Signature

I would like to support Los Altos Community Foundation monthly with a contribution of \$ _____ a month. Please charge my credit card listed above. I understand that I can change or cancel my pledge at any time.

Tribute Gift Information

- This is a gift: In honor of In memory of

Name of Tribute Gift Recipient

Optional: Send acknowledgement to (amount will not be listed)

Optional: Street Address

Optional: City, State, Zip

Telephone Number

Email Address