



The Friends of Chabot College Chabot College Employee Contribution Form

Employee Name _____

First

Last

W # _____ Campus Extension _____

STEP #1 – Select your preferred method of payment.

Ongoing Contribution

☐ **Payroll Deduction** (*available only to CLPCCD permanent workers*)

I hereby request CLPCCD to: ☐ begin ☐ revise/amend ☐ cancel my payroll deduction to The Friends of Chabot College. I authorize CLPCCD to deduct \$_____ monthly from my salary with the understanding that this deduction will continue each month thereafter, until I notify the District to amend or cancel my contribution. I understand that this is a tax-deductible donation that I, as the employee, must deduct as a charitable contribution when I file my taxes and is not considered a pre-tax deduction. The Friends of Chabot College does not provide goods or services for any contribution made by payroll deduction and will provide annual documentation of your total annual contribution.

(Your signature is required to authorize additions and/or changes to your payroll deduction.)

☐ **Automatic Payment for Community Members** (spreads your contribution over the year)

If you know of a community member who wishes to set up a direct payment from their bank account directly to The Friends of Chabot College, check this box ☐ Our office will be in touch with the necessary documents.

One-time Contribution

☐ **Cash/Check** (enclose your contribution with this form)

Amount \$_____ [Payable to: The Friends of Chabot College]

☐ **Credit Card** (complete the following information) ☐ VISA ☐ MasterCard

Amount \$_____ Card # _____ Exp. Date _____

Card holder's name (print) _____

Home address _____

Email _____ Campus Extension _____

☐ **PayPal** – <http://friendsofchabot.org/gift> (cash/check preferred in order to avoid service fees)

See the other side of this form to designate the fund where you would like to apply your gift.

STEP #2 – Designate the fund where you would like your gift to be applied.

Please note that The Friends of Chabot College Board of Directors has established a policy where a one-time 5% fee is charged on any new gift contributed in a given year.

- ☐ Support The Friends of Chabot College _____ %
- ☐ Other College Program/Organization _____ %
- ☐ Other College Program/Organization _____ %

Total: _____ 100%

STEP #3 – Sign and date this form.

Signature _____ Date _____

Signature Instructions: CLPCCD Payroll will not accept an Adobe PDF electronic signature. Please type your name and date in the spaces above and indicate in your email that you are authorizing this payroll deduction as stated in the attached form. Then email to the address listed below.

The Friends of Chabot College is a not-for-profit 501(c)(3) organization. Your gift to the Foundation is tax deductible to the extent allowed by law. Please note that the Foundation Board of Directors has established gift policies which allow a one-time administrative allocation of up to 5% of the value of new gifts to the Foundation.

Please return this signed form and check (if applicable) via campus mail or email to:

The Friends of Chabot College
25555 Hesperian Blvd.
Hayward, CA 94545
friendsofchabot@chabotcollege.edu

Thank you for your support!