



The Fullerton College Foundation

In appreciation of Fullerton College and the students, I pledge the following:

A. \$ _____ to be deducted **from each** paycheck beginning on _____ (date).

I understand this payroll deduction will continue until I notify the District Office in writing to change or discontinue this deduction.

- Does this replace a current payroll deduction? (Yes)____ (No)_____
- Is this in addition to a current payroll deduction? (Yes)____ (No)_____

B. \$ _____ One-time payment Enclosed

C. Credit Card/PayPal go to www.fullertoncollegescholarships.com and click on “Donate”

Print Name: _____

Dept: _____ Date: _____

Signature: _____

This donation is for:

1. _____ Fullerton College Foundation Unrestricted Fund (Where the need is greatest)
2. _____ Fullerton College Scholarship Fund (specify scholarship name) _____
3. _____ Division Scholarship (Specify scholarship name) _____
4. _____ Chris Lamm and Toni DuBois-Walker Memorial Food Bank

PLEASE RETURN THIS FORM TO THE FULLERTON COLLEGE FOUNDATION:

PO Box 431
Fullerton, CA 92836

Tel: (714) 992-7790
Fax: (714) 992-9949

info@foundationfc.com

To those of you who are currently donating to

The Fullerton College Foundation, please accept our heartfelt thanks!