



2020-21 Annual Campaign Gift Form

YES, I would like to support excellent schools and a strong community!

☐ **Donation Amount**

☐ \$4,800 ☐ \$3,600 ☐ \$2,400 ☐ \$1,200 ☐ \$600 ☐ \$300 ☐ \$150 ☐ Other \$ _____

☐ **Join the Leadership Circle**

Leadership Circle members donate \$5,000* or above and are invited to special events.

☐ \$10,000 ☐ \$7,500 ☐ \$5,000 ☐ Other \$ _____

With a goal of \$3.3M, the suggested amount is \$1,200 per student. Since some LASD families may not be in a financial position to contribute this year, please consider giving at a higher level if you are able. Every gift is appreciated. *can be a combination of gift and corporate match*

Donor Information:

Name(s): _____

Phone: _____ Email: _____

My gift is a:

- ☐ one-time gift
- ☐ monthly gift of _____ beginning _____
(date)
- ☐ gift in honor/memory of:

Payment options:

- ☐ Check payable to LAEF
- ☐ Please charge my credit card account
- ☐ Increase my donation by 3% to cover processing fees

Credit Card # _____

Exp. Date _____ Sec. Code _____

Name as it appears on credit card:

Donor Recognition:

In all publications acknowledging this gift, I/we would like to be listed as follows:

- ☐ I/We wish to remain anonymous.

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- ☐ I will request a matching gift from my employer: _____

To see if your employer offers matching, go to: <https://doublethedonation.com/laef>

- ☐ I am interested in transferring a gift of securities/stock.
- ☐ I am interested in discussing planned giving options or giving to LAEF's endowment

Signature _____ Date _____

Mail this form to LAEF, P.O. Box 98, Los Altos, CA 94023 or leave in LAEF bin/folder in school office.

DONATIONS are tax-deductible as allowed by law. LAEF's Tax ID is 94-2862793.

Questions? Contact the LAEF Office at 650.559.0445 or admin@laefonline.org.