



## **DONATION ACCEPTANCE**

**Donor Name As You Would Like it to Appear in Acknowledgements:**

\_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Contribution Amount: \$ \_\_\_\_\_

*(Checks should be made payable to: The Friends of Chabot College)*

**Goods or Services Donated:**

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Value of Goods/Services: \$ \_\_\_\_\_

**Please Return to:**

The Friends of Chabot College

Attn: Sarah Renton

25555 Hesperian Blvd.

Hayward, CA 94545

Email: [friendsofchabot@chabotcollege.edu](mailto:friendsofchabot@chabotcollege.edu)

Phone: 510-723-6633

*Contributions are tax deductible through **The Friends of Chabot College (Tax # 46-3708462)**  
and will be acknowledged in writing for your records.*