



Donation & Commitment Form

Name: _____

Company: _____

Address: _____

City: _____

State: _____

Zip: _____

Telephone #: _____

Email: _____

Yes, I want to support a pipeline of diverse and talented future CPAs!

I would like to invest at the following level:

- \$25,000
- \$10,000
- \$5,000
- \$2,500
- \$1,000
- Other: _____

Gifts of \$1,000+ will be featured in Interim Report and receive a special communication.

Fulfillment of Gift:

My check is enclosed.
(Please make checks payable to NC CPA Foundation, Inc.)

Please charge the following credit card:

for this year only for the next three years

Name on card: _____

Billing address *(if different than previously provided):*

Credit Card #: _____

Expiration Date: _____ CVV: _____

Signature: _____

Name as it should appear for recognition:

This is a personal / corporate gift.

Other opportunities to support:

- Interested in scholarship naming rights.
- Follow up with me about planned giving opportunities.
- Follow up with me about volunteering to support the work of the Foundation *(reviewing applications, outreach, etc.)*.

Thank you in advance for your support of the NC CPA Foundation, Inc.

PO Box 80188, Raleigh, NC 27623

Please contact Mark Soticheck (msoticheck@ncacpa.org) to set up installment payments *(monthly, quarterly, etc.)* and/or to set up recurring donations.