



**YES! I want to donate to the Albany Education Foundation.**

**Here is my tax-deductible contribution in the amount of \$ \_\_\_\_\_.**

Full Name \_\_\_\_\_

Address \_\_\_\_\_ apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone# \_\_\_\_\_

Payment method:  Check payable to Albany Education Foundation enclosed.

Please charge my full contribution to Visa, MasterCard, American Express listed below

I prefer to pay in 12 monthly installments of \$ \_\_\_\_\_ each to my charge card.

Visa  MasterCard  American Express # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name as it appears on card \_\_\_\_\_ Signature \_\_\_\_\_

My employer has a matching gift or corporate giving program. I am including my company's form.

I'd like to volunteer. My email address is: \_\_\_\_\_

For more AEF information, please contact Dianne McNenny at: (510) 527-8476.

If you have questions about financial arrangements please email AEF at: [info@albanyeducation.org](mailto:info@albanyeducation.org)

Please mail your donation and form to: **Albany Education Foundation**  
**1320 Solano Avenue, Suite 203**  
**Albany, CA 94706**