



NED ALUMNI ASSOCIATION OF SOUTHERN CALIFORNIA (NEDAASC)

Donation Form for Scholarship

Donor Information (please print or type)

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Billing address	
City	
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Donation Information

I (we) donate a total of \$ _____ to be paid:
____ now ____ monthly ____ quarterly ____ yearly.

I (we) plan to make this contribution in the form of:
____ cash ____ check ____ credit card ____ other.

I (we) designate my donation to be spent on any one of the listed categories:
____ Undergraduate Students ____ Graduate Students ____ Doctorate Students

Payment by Credit Card

Please click on the link <http://www.nedaasc.org/Login.aspx> and make online donation using your credit card.

Gift will be matched by _____ (company/family/foundation).
____ form enclosed ____ form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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____ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

NED Alumni Association of Southern California or NEDAASC
739 N. Main Street, Orange, CA 92868
Phone: (714) 412-6408 Fax: (714) 771-1278
E-mail: Nedaasc@aol.com
Web address: <http://www.nedaasc.org/>