

If you have a child, you have a reason. And now, you have a donor form.

All it takes now is a moment of your time, and a desire to help make our schools better.

Not just for kids in general, but for your child.


Every donation effects every child in some way. Even things like health assistants in the nurses' offices and librarians wouldn't be there for your

child if it wasn't for your generosity.

So please, take a moment right now.

You can charge your donation to your credit card. Or send us a check. Or make a pledge and send us your donation in installments.

Thank you!

DONOR LEVELS	DONATION OPTIONS	OFFICE USE ONLY
<p>Dream Team: \$ 50,000+</p> <p>Valedictorian: \$ 25,000 - 49,999</p> <p>Honor Roll: \$ 15,000 - 24,999</p> <p>Leadership: \$ 10,000 - 14,999</p> <p>Benefactor: \$ 5,000 - 9,999</p> <p>Patron: \$ 2,500 - 4,999</p> <p>Super Circle: \$ 1,500 - 2,499</p> <p>Sponsor: \$ 500 - 1,499</p> <p>Donor: \$ 250 - 499</p> <p>Contributor: under \$ 250</p>	<p><input type="checkbox"/> My total donation of \$_____ is enclosed. (Make check payable to Manhattan Beach Education Foundation.)</p> <p><input type="checkbox"/> Charge my total donation of \$_____ to my credit card. Amex/Visa/MC#_____</p> <p>Signature_____ Expiration_____</p> <p><input type="checkbox"/> I am making a total pledge of \$_____ Please check pledge payment method: ___check ___credit card Please choose your pledge payment date - or, if you'd like to break your payments into installments, up to four dates: ___Oct. 1 ___Dec. 1 ___Feb. 1 ___April 1</p> <p><input type="checkbox"/> Please send information on the MBEF Endowment Fund</p>	

Please complete the information below. It helps us keep accurate records and acknowledge your donation.

Mr. Mrs.
 Ms. Dr.

Donor Name: _____
First Last

Mr. Mrs. Phone Email
 Ms. Dr.

Spouse Name: _____
First Last

Phone Email

Address

City Zip

I want my gift to be anonymous This is a new address.

Parent Grandparent Community Supporter

MBUSD Administrator Teacher Staff School _____

<u>Child</u>	<u>School</u>	<u>Grade</u>
1. _____		
2. _____		
3. _____		
4. _____		

Company Gift Match Information

Employer _____

Enclosed is a matching gift form. Please process.

I have applied with my company for a match.

My donation and company match will be sent by my employer.

Not sure. Please check and email me at _____

QUESTIONS? Call MBEF at 310-303-3342, or visit our website at WWW.MBEF.ORG. Tax ID#95-3881166.

Manhattan Beach Education Foundation P.O. Box 1110, Manhattan Beach, CA 90267. Fax 310/303-3828