

Thank You for Making a Difference!



To make a gift, please fill out this form and mail to the address below.
(*indicates required field)

*Name: _____ Spouse Name: _____
*Address: _____ *City: _____ *State: _____ *Zip: _____
*Telephone: _____ *Email: _____
If alumni, name while enrolled if different from above: _____ Class year: _____
CSUF Student Name: _____ Anticipated Grad Year: _____
Business Name _____ Title/Position _____
Business Address _____ City: _____ State: _____ Zip: _____
Business Phone: _____ Business Email: _____

To enhance learning on campus, please allocate your gift to one of the following areas on campus:

- | | |
|--|--|
| <input type="checkbox"/> College of the Arts (40000) | <input type="checkbox"/> College of Humanities and Social Sciences (30000) |
| <input type="checkbox"/> College of Business and Economics (10000) | <input type="checkbox"/> College of Natural Sciences and Mathematics (70000) |
| <input type="checkbox"/> College of Communications (60000) | <input type="checkbox"/> Titan Athletics (95980) |
| <input type="checkbox"/> College of Education (85000) | <input type="checkbox"/> Titan Fund Scholarships (91611) |
| <input type="checkbox"/> College of Engineering and Computer Science (20000) | <input type="checkbox"/> <i>University's Greatest Needs</i> – Titan Fund (91610) |
| <input type="checkbox"/> College of Health and Human Development (80000) | <input type="checkbox"/> Other _____ |

Comments: _____

Gift Amount:

- \$25 \$50 \$100 \$500 \$1,000 Other _____

Billing Information

- Check is attached (make payable to "Cal State Fullerton Philanthropic Foundation")
 Charge my credit card (information below)

Card Number: _____ Exp. Date: _____
Card Type VISA MC AMEX Discover Signature: _____ Date: _____

I would like to make this gift in honor or in memory of someone.

- In Honor of: Please tell us the name and address of the person you are honoring:
Name: _____
Address: _____
- In Memory of: Please tell us the name of the person you are memorializing. If you'd like us to notify the family please provide their name(s) and contact information:
Name: _____
Family Name(s) and Contact Information: _____

Mail the completed form to Cal State Fullerton Philanthropic Foundation; PO Box 843730, Los Angeles, CA 90084-3730. For questions or more information, please call (657) 278-4180.

Double or even triple your gift if you work for a matching gift company. Find out if your company has a Matching Gift program by going to www.matchinggifts.com/csuf/ or contact your Human Resources department. After submitting your donation, please reach out to your company to match your donation.