Mail In Contribution Form

CONTACT INFORMATION:

First Name: ________________________  Last Name: ___________________________

Company Name: _____________________________________________________________

Address: ____________________________

City: _______________________    State: ____________________   Zip: ___________

Phone: ____________________      Email: _______________________________

DONATION INFORMATION:

Corporate Donors $____________

Generous Contributors $____________

   Platinum Donors - $100,000+
   Gold Donors - $50,000 to $99,999

   Silver Donors - $25,000 to $49,999
   Bronze Donors - $5,000 to $24,999

General Contributors
(Note: Check the box next to amount being donated or enter the donation amount)

$1000.00 ___ $100.00 ___

$500.00 ___ Other $__________

Make check, money order or cashier check payable to:

African American Cultural Center

MAILIN FORM AND CHECK TO:

African American Cultural Center of Silicon Valley
304 N. 6th Street
San Jose, Ca 95112