



**N**orthshore  
**P**ublic  
**E**ducation  
**F**oundation

**Northshore Public Education Foundation**

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**CONTRIBUTION FORM**

**Please print this form, complete the following information and send it, along with your donation, to the Northshore Public Education Foundation at the above address.**

**Personal Information**

Name: \_\_\_\_\_  
 (As you wish to be acknowledged)

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

I wish to remain anonymous

**Donation Information**

I am paying by:

Check     Money Order     Credit Card

Credit Card Type:     Visa     Master Card

Credit Card # \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

My tax deductible donation is:

\$ \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_

- This is a one-time payment
- Installment Gift to be paid     Monthly     Quarterly
- My employer with match this gift (form enclosed)

**Tax Deductible Contribution Levels**

- \$1,000                    Valedictorian
- \$500-\$999                Salutatorian
- \$300-\$499                Honor Roll
- \$100-299                  Booster
- \$1 - \$99                    Friend

May we include your name as one of our honored donors on our website and in our other publications?     Yes     No

**Signature:** \_\_\_\_\_    **Date:** \_\_\_\_\_