



Charitable Donation Form

Please make check payable to **Oakmont Community Foundation**.
Mail To: OCF, 6575 Oakmont Drive, Suite 7, Santa Rosa, CA 95409.
Or: place in OCF folder in OVA Office.

Donor Name(s) _____

Address _____

Phone _____ E-mail _____

___1. Enclosed is a donation of \$ _____ to the Oakmont Community Foundation General Fund, to be used in the best interest of the Oakmont Community.

___2. Enclosed is a donation of \$ _____ to the Oakmont Community Foundation to be used for the following purpose by a specific, recognized Oakmont club or organization:

Organization _____

Purpose _____

___3. Enclosed is a donation of \$ _____ to the Oakmont Community Foundation Endowment Fund.

___ This donation is () in honor () in memory of _____

Name(s) preference for recognition as a contributor _____

Donations are listed only by name and honoree, if any. Amounts remain confidential unless otherwise specified by the donor.

Donor Signature _____ Date _____

The Oakmont Community Foundation is a qualified tax-exempt non-profit corporation under California law, organized and operated exclusively for public, educational and charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code and applicable California law. Contributions may be tax deductible under Section 170 of the Internal Revenue Code. All contributions must conform to the guidelines established by the Oakmont Community Foundation.

OCF Use Only.

\$ _____ Received on Date _____ Check No. _____

OCF Signature _____ Date _____

Oakmont organization notified _____ Confirmation letter sent to donor _____