

CEED Alumni Giving Form

General Information – Please type or print clearly

Name: _____

Maiden Name: *(if applicable)* _____

How did you enter UCLA? Freshman Transfer

What year did you enter UCLA? _____

Address: _____

City, State, Zip: _____

Telephone #: _____

Email Address: _____

Gift Details

\$100

Other: _____

Donation Process

Checks should be made payable to **UC Regents/UCLA CEED** and mailed to:

UCLA CEED 100³ Fundraising Campaign
UCLA CEED Office
405 Hilgard Avenue
Boelter Hall 6291
Los Angeles, CA 90095-1600
Tax ID# 95-6006143

Phone: (310) 206-6493

Email: ceed@seas.ucla.edu

Check this box if your company will be making a matching donation on your behalf.

Company Name: _____

Amount: _____

If you'd like to make an online credit/debit card contribution, visit:

<https://machform.seas.ucla.edu/machform/view.php?id=8>