

Donor Information	
Name(s)	
Billing Address	
City, ST Zip Code	
Phone 1 Phone 2	
Email	
Pledge Information	
I (we) pledge \$2,500 to join the Leadership Circle I (we) plan to make this contribution in the form of: □check □credit card □PayPal (www.lpef.org)	
Credit Card Type Exp. date	
Authorized Signature	
Gift will be matched by (company/family/foundate)	ation)
Acknowledgement Information	
Please use the following name(s) in all acknowle	edgements:
\Box I (we) wish to have my (our) gift remain anony	ymous.
Signature(s)	Date
Please make checks, corporate matches, or other gifts payable to:	LPEF
	23800 Summit Road Los Gatos, CA 95033
LPEF (Loma Public Education Fund)	LUS GALUS, CA 33033

Members of the Leadership Circle are recognized for demonstrating a level of generosity that is transformative, by donating or directly raising \$2,500 or more during the fiscal year to LPEF's annual fund (matching corporate gifts are not included in the total gifts).