

MAKE YOUR *donation* TODAY

DONOR COMMITMENT

_____ **One Year Commitment (50% tax credit)**

New 2-year pledge:

_____ **Two Year Commitment (75% tax credit each year)**

Completion of 2-year pledge:

If I agree to make a two-year commitment, I agree to contribute the same amount for two consecutive years. In return, I will receive Oklahoma tax credits equal to 75% of my donation within annual limitations.

Year 1:

Year 2:

Complete this form and make the initial donation check payable to ***The Academy Opportunity Scholarship Fund***. Mail to *The Academy of Classical Christian Studies, Attn: SGO, 1120 E Hefner Rd, Oklahoma City, OK, 73131*. Forms may also be dropped off at any campus in an envelope marked Attn: SGO.

DONOR SECTION

Business Name:

Name:

Address:

City/State/Zip:

Phone:

Email:

Donation Amount:

Donor SSN/EIN*

*The Oklahoma Tax Commission requires us to provide your Social Security Number/ Employer Identification Number in order for you to claim your tax credits for donating to AOSF.

Donor Signature:

Date:

**must be postmarked by 12/31 to receive current year tax credit*

FOR AOSF OFFICE

Date Donation Received:

By:

Date Receipt Letter Mailed:

By:



The ACADEMY
OPPORTUNITY SCHOLARSHIP FUND