



▲ Name		
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▲ Phone ▲ Email		
Yes, I would like to support the Center for Innovation by making a gift to the Legacy Campaign.		
☐ ▲ Gift of	▲ to name the/a	
☐ ▲ Gift of	▲ to the Investor's Society	
I would like to make one of these pledges to the Legacy Campaign: My gift is enclosed.		
One-time contribution of:  By this date:	3-year annual contribution of:	
2-year annual contribution of:	My employer provides matching funds for non-profit contributions. Company:	or
METHOD OF PAYMENT		
Check Enclosed. (Make Checks Payable to Edgecombe Community College Foundation, Inc.)	Please charge my gift.  Visa MasterCard Discover An  *For secure online giving visit: Edgecombe.edu/ecc-j	nerican Express foundation
☐ I have included Edgecombe Community College in my estate plans	Name on card:	
I am interested in learning more about planned giving opportunities.	Card #:	
Return your gift to: Office of the President Edgecombe Community College 2009 W. Wilson St. Tarboro, NC 27886	Expiration Date:	
	Signature:	

To request additional information, please contact:

ECC President (252) 823-5166, ext. 253