Child Assistance Fund GIVING CAMPAIGN FORM

Making a Difference, One Child at a Time



Child Assistance Fund helps students with special needs serves through SBCSS County programs. The brochure and information is available on the web at www.sbcss.kl2.ca.us/caf.

First Name		
	Last 4 Digits of your SSN:	
Last Name	Contact Number:	
\ \	ho We Are	
The Child Assistance Fund (CAF) was establish student needs for services that could not organization with board members who are San	be met through existing progr	rams. CAF is a non-profit
Wh	nat We Do	
The funds donated are used to meet the spec programs operated by the San Bernardino Cou	•	nts who are enrolled in any
When a family/parent is unable to obtain sersection and receive the education they so despostain the services and/or materials.		
Through this fund, students have been provided clothing, books, tickets to education-based field to school, and many other needed services and there for students! The goal of the Child Assistance Fund is to enhance the served by the San Bernardino County Superint need or other forms of familial distress.	ld trips, awards, bicycles, infant can supplies. When all other resource ance the educational experience of	ar seats, bus transportationes are exhausted, the CAF in the programs
Donation Amount: \$10 \$15	\$20 \$25 \$30 Other	
I authorize the San Bernardino County Su specified amount on this form to begin w I acknowledge elected contributions will I	ith my next payroll cycle.	
Signature	Date	

