Frisco Family Services 2020 Mayor's Golf Classic

Monday, June 15, 2020

PRIZE DONOR AUTHORIZATION FORM



*Please PRINT and use one for	orm for each item donated.				
Company Name (Please provide	le name as you wish it to appe	ear in publications.)			
Contact First Name	Contact Last I	 Name	Title		
Address	City		State	Zip	
Phone Number	Fax Number		Type of Business		
Email Address					
	☐ I would like to re	main <u>anonymous</u> for th	nis donation.		
	DONAT	TON DESCRIPTIO	N		
Stipulations:	ea				
Special Conditions, Restrictions,	Expiration Date, Available Da	tes (Please note the date	of the event is June 15, 2	2020.)	
Delivery Instructions:					
Item Attached Will Deliver On: Other:					
□ Please create a certific	ate for this donation				
The undersigned does hereby give an all rights, title and interest in the properthe IRS Code. Your contribution is tax	erty described. Frisco Family Ser	vices is a Texas non-profit o			
Donor Authorizing Donation		Fundraising Committee Member			

Please Email, Mail or Fax form to:
P.O. Box 1387
Frisco, TX 75034
Phone 972-335-9495 I Fax 972-335-9487
events@friscofamilyservices.org