Frisco Family Services Gala 2016 - ONE April 16, 2016

AUCTION DONOR AUTHORIZATION FORM

Please **PRINT** and use one form for each item donated.

972-335-9495 fax 972-335-9487

gala@friscofamilyservices.org

Company Name (Please provide name as you wish it to appear in publications.)

Contact First Name	Contact Last Name	Title		
Address	City	State	Zip	
Phone Number	Fax Number	Type of Busin	Type of Business	
Email Address	l would like to remain	a <u>anonymous</u> for this donation.		
		DESCRIPTION		
Please provide a detaile	d description of the dona	ated item:		
Require Stipulations: Special Conditions, Restrictions, E		ease note the date of the event is April 16,	2016.)	
Delivery Instructions:				
	ivery On:	Other:		
	ate. Please create a cer			
Dicploy				
□ No display material □ N	Ion-returnable display mate	uction video display to gala@friserial	/ material.	
all rights, title and interest in and prope		ces as a charitable contribution, and Frisco Far a Texas non-profit charitable organization, qua v.		
Donor Authorizing Donation	Fundr	aising Committee Member		
Please Return by Email, Mail or fax for P.O. Box 1387	m to:	Jse Only Date Entered		
Frisco, TX 75034				

Location_