

DONATION REQUEST – ATTENTION KATHERINE

RESTAURANT YOU ARE REQUESTING THE DONATION FROM:
PERSON SUBMITTING:
PHONE NUMBER OF PERSON SUBMITTING:
ORGANIZATION:
ADDRESS & PHONE NUMBER OF ORGANIZATION:
DAY & DATE OF EVENT:
LOCATION OF EVENT:
GUESTS EXPECTED:
DONATION REQUEST:
WAY IN WHICH THE DONATION WILL BE USED: (SILENT AUCTION, LIVE AUCITON, DOOR PRIZE, GRAND PRIZE)
DEADLINE FOR INCLUSION IN PRINTED MATERIALS:
DEADLINE FOR INCLUSION IN EVENT: