



CULINARY *Celebration*

Donation Contract

Please provide your name as you wish it to appear in publications
(please print)

Business Name: _____

Contact Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

AUCTION DONATION

I agree to donate the following:

Item & Description: _____

Expiration Date: _____ Retail Value: _____

Promotional Materials Supplied Y or N

Pickup Instructions: _____

Signature: _____ Date: _____

THANK YOU FOR YOUR SUPPORT!

Please return form to:

Carroll Education Foundation* PO Box 93041* Southlake, Texas 76092

PHONE: 817-949-5982 FAX: 817-949-5986

Tax ID# 75-2638646