



DONATION FORM

Please print your information as you would like it to appear on printed materials and return this form with your generous donation by February 1, 2011, in order to be included in the Pathways of Promise program.

Company/Donor Name: _____

Contact Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: (_____) _____ **Fax:**(_____) _____

E-mail: _____ **Website:** _____

Items to be Donated: _____ **Value of Donation:** _____

Donation Description: (Please include quantity, size, number of rooms, number of persons per night, price per item, etc.) _____

Restrictions: _____

Unless otherwise specified all donations are understood to be valid for one year from the Auction date.

Please mail donation to: FSMA, Pathways of Promise
1180 Jacob Lane
Carmichael, CA 95608

Please check all that apply:

- Gift Certificate or Item Enclosed
- Cash Donation Enclosed (check payable to FSMA)
- I will deliver item(s) by (date) ___/___/___ to (contact name) _____
- Please pick up item on (date) ___/___/___ at (location): _____
- I have enclosed brochures, photo, or display materials.

Or Call: Glenn McWilliams @ 804-9540 to arrange pick up.
Completed donation form may be faxed to (916) 570-2770.

THANK YOU FOR YOUR SUPPORT!!

FOR OFFICE USE ONLY:

Date: _____ **Category:** _____ **Location:** _____ **Solicitor:** _____ **Thank you:** _____