



2015 EEGS Foundation Merchandise Donation

Thank you very much for your donation to the EEGS Foundation. The following information is requested in order to permit us to give you full recognition for your donation.

DONOR INFORMATION

Name of Company: _____
 Street Address: _____
 City/State/Zip: _____
 Contact Person: _____ E-mail: _____
 Phone: _____ Signature: _____

DONATION INFORMATION

TYPE OF DONATION	FORM OF DONATION	DONATION DELIVERY
<input type="checkbox"/> MERCHANDISE	<input type="checkbox"/> BUSINESS Gift Certificate	<input type="checkbox"/> ATTACHED
<input type="checkbox"/> SERVICES	<input type="checkbox"/> GIFT CERTIFICATE	<input type="checkbox"/> WILL SHIP
<input type="checkbox"/> USE OF PROPERTY	<input type="checkbox"/> TANGIBLE DONATION	<input type="checkbox"/> NEEDS TO BE PICKED UP
<input type="checkbox"/> DINNER OR EVENT		<input type="checkbox"/> PHOTO ATTACHED

DESCRIPTION OF DONATION

Please describe the donation in detail:

Please specify any conditions or restrictions (i.e. number of persons, time of year, excluded dates, geographical limitations): _____

Please indicate any expiration date: _____

Please indicate approximate value of donation: _____

Email to: eegsfound@gmail.com

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