

Donation Form/Gift-In-Kind Contribution

Contributor's Name:		Date:
Contributor's Signature:_		
	y as you would like to be recognized) orI wish to	romain Angrymous
(Flease list your name/compan)	y as you would like to be recognized on wish to	Teniani Antilyinous
Address:		
City:	State:	Zip:
Contact Phone:Email:		
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Donation Details		
Please print clearly and submit form and donation before April 22, 2022		
*Mail to 1105 S. Euclid Ave, Ste D-349 Fullerton, CA 92832 or LOF representative will contact you to make arrangement for pick up		
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Donation Title (please sp	ecific):	
Potail/Eair Markot Valuo:	\$	
Retail/Fall Market Value.	J	_
Donation description: (ie	Quantity, Theme-color; Size; Restrictions,	Expiration dates; Location info)
=		
Please check one:	Donation attached/enclosed	Gift Certificate attached/enclosed
	Make arrangements for pick up or	date/

THANK YOU FOR YOUR SUPPORT

Leon Owens Foundation is a 501 (c) 3 non profit organization, Tax ID # 33-0634287.

A official acknowledgement for your donation will be mailed to you.

Would you like to register as a golfer or purchase a "banquet only" to this event? Please call at **(714) 687-5520** or email Shirley Owens McClanahan at **Shirley@leonowensfoundation.org**