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**2017 Golf “Fore” Education Tournament**

**In-Kind Donation Form**

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| --- |
| **Donor Information** |
| **Donor or Company Name**: (exactly as it should appear in the printed materials): |  |
| **Contact**:  |  | **Title**: |  |
| **Address**: |  |
| **City, State and ZIP**: |  |
| **Daytime Phone**:  |  | **Alternate #**:  |  |
| **E-mail**:  |  | **Company Web Site**: |  |
| **Signature**: |  | **Date**:  |  |
| **Donated Item Description** |
| **Detailed description** (quantity, size, color, restrictions or other information pertaining to the item/items being donated): |
|  |
| **Expiration Date (**if applicable**)** | **Delivery Instructions:**

|  |  |  |
| --- | --- | --- |
| **Item(s) is (are)** | **Yes** | **No** |
| Enclosed |  |  |
| To be delivered by donor |  |  |
| Delivery Date: |  |
| To be picked up by committee |  |  |
|  Pick-up Date: |  |
| Other: |  |
| Date: |  |

 |
|  |
| **Retail Value** (itemize if more than one item): |
|  |

**Please return form to by March 17, 2017:**

Charneisha Pates

Foundation for Seminole County Public Schools

400 E. Lake Mary Blvd., Sanford, FL 32773

Phone: 407.320.0119 Fax: 407.320.0285

 **Charneisha\_Pates@scps.k12.fl.us**

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. Employer Identification Number (EIN): 59-2775956