

In the Pink Too

Donation Agreement

Name of Contact: _____

Individual or Company Name: _____

(As it will appear in the event program)

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Contributor Opportunities

Please indicate all that apply:

- _____ Monetary donation for Longaberger® Product(s) to be auctioned.
- Please indicate name of individual or company to be recognized for this donation.

 - Please indicate the amount of donation. _____
 - Please make checks payable to Longaberger® Consultant, **Jeanné Wildman**.

- _____ Donation of Prize(s)
- Please indicate quantity and description of item(s) to be donated.

 - Please indicate monetary value of donated item(s) _____

- _____ Monetary Donation
- Please indicate the amount of donation. _____
 - Please make checks payable to: **HERS Foundation. Tax ID # 94-3309906.**

- _____ Table Sponsorship (\$100 per table): Each table will feature a framed certificate celebrating the memory or life of a loved one touched by Breast Cancer. Your name as indicated above will also appear on the framed certificate as the sponsor of the table.
- In Celebration of _____ or In Memory of _____
 - Please make checks payable to: **HERS Foundation. Tax ID # 94-3309906**

Please return this form and your donation(s) by September 15, 2008 to:

Jeanné Wildman *In the Pink Event Too*

1783 Whippoorwill St

Livermore, CA 94551

Phone: (925) 456-8366 **E:mail:** jeannewildman@comcast.net