

KIDNEYTEXAS, INC.

2018 LUNCHEON & STYLE SHOW SEPTEMBER 27, 2018 BROOK HOLLOW GOLF CLUB

AUCTION CONTRACT

Name Of The Firm, Foundation Or Individual EXACTLY As It Should Appear In Print In All Publications:

NAME _____

CONTACT _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ EMAIL _____

DESCRIPTION OF DONATION:

RESTRICTIONS, IF ANY:

RETAIL VALUE: \$ _____

- | | |
|--|--|
| <input type="checkbox"/> Merchandise attached | <input type="checkbox"/> Gift Certificate Attached |
| <input type="checkbox"/> Donor will mail/deliver | <input type="checkbox"/> Call donor for pick-up |

KIDNEYTEXAS, INC. COMMITTEE MEMBER CONTACT _____

DONOR SIGNATURE _____ DATE: _____

For further information, visit www.kidneytexas.org

Please mail or fax contract to:

KidneyTexas, Inc., 6138 Berkshire Lane, Suite 10, Dallas TX 75225, 214-891-0896, Fax: 214-368-3635

Email: kidneytexas@sbcglobal.net

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