



SPONSOR RECEIPT



BUSINESS: _____

CONTACT: _____

ADDRESS: _____

CITY: _____ STATE: _____

PHONE: _____ FAX: _____

E-MAIL: _____

SPONSORSHIP LEVEL (CHECK ONE):

- Dinner - \$1,000
- Byway - \$100
- Big Event - \$500
- CCC - \$50
- Business - \$250
- Donated Item

DESCRIPTION OF DONATED ITEM & VALUE RESTRICTIONS:

(Applicable dates, number of people, conditions. Unless it is otherwise stated certificates are good for one year.)

DONOR SIGNATURE: _____ DATE: _____

SOLICITOR SIGNATURE: _____ DATE: _____



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