## The Indiana 3<sup>rd</sup> Annual Autism Golf Classic benefiting TACA - Donation Form



August 24, 2015 The Hawthorns Golf & Country Club

Please type or print exactly as it should appear in written materials

Company/Donor Name		
Company Contact	Title	
Mailing Address		
City	State Zip	
Phone	Fax	
E-mail		
I would like to donate the followi	ng item(s):	
With the Fair Market Value of: _		
Does this donation have any cond	litions, restrictions or expirations?	YES NO
If yes, explain:		
Please check one:		
$\Box$ Donation is enclosed	Donation will be mailed	/ delivered
Donation needs pick up	□ Please contact me	
□ I would like to support familie	es with autism by providing a donation of \$	
Dona	ated items can be shipped to:	
	ism Golf Classic Benefiting TACA eeline Court •Fisher, IN 46037	
Please mail certificate(s) or item	n(s) to the address listed above prior to August	; 19, 2015.
-	call 949-640-4401 or fax this form to (949) 640 $$	)-4424.
Fe	deral Tax ID# 27-0048002	