



One **ELLE** of a Night – Designer Purse Bingo

“Creating Memories for **ELLE**’s Kids”

Thursday, May 7, 2020, Bridgewater JCC

Please Print & Include a Copy with Your Donation (Keep a copy for your records)

Title _____ First Name _____ Last Name _____

Business Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone # _____ E-Mail Address (necessary for confirmation) _____

CONTACT NAME: _____ Business Website: _____

Exclusive Sponsorship - Please place an X in the box after Sponsorship desired

Moment of Joy Sponsor _____ \$1000.00 _____
Program Sponsor Recognition

Dream Maker Sponsor _____ \$500.00 _____
Program Sponsor Recognition

Hand in Hand Sponsor _____ \$250.00 _____
Program Sponsor Recognition

ELLE Ambassador Sponsor _____ \$100.00 _____
Program Sponsor Recognition

Gift-In-Kind Donation and Tax Receipt

Donor’s Estimated Retail/Fair Market Value of Donation (required for processing) *

Description of Donation (please be specific)

Donor Signature _____ Date _____

Mail this form along with your donation or check made payable to:
ELLE Foundation Inc., 8 Stella Drive, Bridgewater, NJ 08807
Questions? Or to arrange for donation pick-up
email Laurie at larichmond@ellefoundation.org

*VALUE LISTED HAS BEEN DETERMINED BY THE DONOR, NOT THE ELLE FOUNDATION, INC. It is the responsibility of the donor to substantiate the fair market value for his/her own tax purposes. No goods or services were received in return for this donation. Please consult with your tax advisor to determine the tax implications of your donation.

Office Use: Check#: _____ Check Date: _____ Amount: \$ _____ Reg # _____