



Saturday, February 29, 2020 | 5:30 PM—Sioux City Country Club

DONATION COMMITMENT

Company Name: _____

Contact Person: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Donated Items: Please include any details, restrictions or expiration dates (i.e. Vacation can be used during xxx dates, etc.) Attach any additional information as needed.

_____	\$ _____
Item Description	Estimated value
_____	\$ _____
Item Description	Estimated value
_____	\$ _____
Item Description	Estimated value
_____	\$ _____
Item Description	Estimated value
_____	\$ _____
Item Description	Estimated value

Attendance/Tickets

_____ Yes, I would like to purchase _____ # of tickets at \$75.00 each

_____ \$560 per Reserved Table of eight (8). (\$5 discount per ticket)

Donations - Financial

_____ Please accept my enclosed tax-deductible donation in the following amount
\$ _____.

THANK YOU! STARS is a non-profit agency. Your donation may be tax deductible.
Please check with your tax preparer for more details. Tax ID#: 42-1243616