

THE 1<sup>ST</sup> ANNUAL **MADLINE GUARRAIA GOLF CLASSIC**  
**RAFFLE DONATION FORM**

**SEPTEMBER 29, 2016**



Company \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Email Address \_\_\_\_\_

**ITEM INFORMATION**

Please describe the item.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Retail value of donation \$ \_\_\_\_\_ (For tax-deduction purposes, the Internal Revenue Service requires the donor to provide documentation of the value of in-kind donations.) *Lea's Foundation for Leukemia Research reserves the right to set the minimum bids and to combine the donation with other items, if necessary.*

<input type="checkbox"/> Gift Certificate (Attached)	<input type="checkbox"/> Pick Up Required. <i>Please arrange a time.</i>
<input type="checkbox"/> Tangible Item Enclosed	<input type="checkbox"/> Item will not be available until after event, please contact:
<input type="checkbox"/> Donor will deliver/mail to: Dan Nolan	Name _____
218 Shore Road, Waterford, Ct 06385	Phone _____
by _____	Email _____

Board/Committee Member \_\_\_\_\_ Cell \_\_\_\_\_

All donations are tax deductible as allowable by law. Lea's Foundation is a 501(c)3. TAX ID# 06-1520923

**Please make checks payable to "Lea's Foundation for Leukemia Research, Inc."**

Please return form to:  
Dan Nolan  
Email: [Ltdanhfd@aol.com](mailto:Ltdanhfd@aol.com)  
Scan form to his email  
Any questions, please contact Dan at 860.559.8450

Please send checks to:  
LFLR  
c/o Penny Wills  
522 Cottage Grove Rd., Bldg. H  
Bloomfield, CT 06002