



to benefit



DONOR AGREEMENT

Company Name: _____

Contact: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

I would like to support Brehon Institute's mission of improving the lives of children and their families. Completion of this agreement confirms my contribution of the following donation for the 1st Annual Brownie Battle & Chili Challenge:

Any restrictions?

- I will... deliver the items I wish to donate on or before **October 23, 2009**.
 mail the items I wish to donate to be received on or before **October 23, 2009**.
 request that someone pick up the items I wish to donate on or before **October 23, 2009**.

RETAIL VALUE OF DONATION: \$_____

Donor agreement forms may be faxed to Brehon Institute at 850.656.7127 or mailed or delivered to Brehon's main office at 2222 Old St. Augustine Road, Tallahassee, Florida 32301. All items should be mailed or delivered to the same address.

Agreed to by:

Signature, Authorized Representative

Date