

LONE STAR COLLEGE FOUNDATION

Donor Form

DONOR PLEASE COMPLETE SECTION I & II

I. Donor Information:

_____			_____	
Donor			Date	
_____			_____	
Address			Telephone	
_____			_____	
City	State	Zip	Fax	
_____			_____	
Name of Contact			Contact Telephone	
_____			_____	
Signature			E-mail	

II. Donated Item Information:

Retail or Appraised Value: _____

Detailed Description: _____

All Restrictions: _____

- Certificate to be printed by The Foundation
- Certificate attached
- Item to be picked up

- Item stored at The Foundation
- Item stored at: _____

VOLUNTEER PLEASE COMPLETE SECTION III

III. Volunteer Information:

_____		_____
Name		Telephone

E-mail		

5000 Research Forest Drive The Woodlands, Texas 77381-4356
832.813.6640 Fax: 832.813.6639

White Copy - The Foundation Yellow Copy - Donor

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