



In-Kind Donation Form

What A Pair!8

Company _____

(Please Print - as it should appear in catalog)

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Description of donation _____

Restrictions _____

Expiration (*Please have all certificates valid for one year*) _____ Estimated Value \$ _____

Certificate is attached Certificate or Item will be mailed

Donor Signature _____

Please fax or send this form to:

**Blue Room Events
Attn: Geneva or Amy
5777 West Century Boulevard, Suite 880
Los Angeles, CA 90045
Phone: 310-491-1401 Fax: 310-491-1405**