

**THANK YOU FOR MAKING A DONATION FOR THE 2024 KIWANIS COOKING SHOW.**

**PLEASE COMPLETE THIS FORM TO BE RETURNED WITH YOUR DONATION.**

Company name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Street address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone number: \_\_\_\_\_

**Please check one of the following:**

\_\_\_\_\_ We will drop off the donation to:

Kiwanis Manor

7 W Market St.

Tiffin, OH 44883

\_\_\_\_\_ Please contact to arrange pick-up

**DESCRIPTION OF ITEM/VALUE OF GIFT**

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

**In order to recognize your company during our event please include a short paragraph you would like to be announced.**

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

**WE APPRECIATE YOUR SUPPORT AND HOPE TO SEE YOU AT THE SHOW!**