

The Atlanta Wine Opener

Benefiting the Cystic Fibrosis Foundation
THURSDAY, FEBRUARY, 25, 2010

2010 CONTRIBUTION FORM

DONATING COMPANY / INDIVIDUAL:

Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

I WOULD LIKE TO DONATE THE FOLLOWING ITEM:

ITEM: _____

RETAIL
VALUE: _____

CREDITS: Please list company or donor as:

PLEASE LIST ALL RESTRICTIONS & EXPIRATION DATES:

EXCHANGES: The gift may be exchanged for other merchandise. Yes No

DELIVERY: (need by February 11th *at the latest*) will deliver to the Cystic Fibrosis Foundation by _____

will have gift available for pick-up anytime after _____

ITEM RECRUITED BY VOLUNTEER: _____

Actual Item needed by February 11, 2010

Please return as soon as possible to Amanda Gilbert at the Cystic Fibrosis Foundation via fax: **404-325-7921** or
mail to: Cystic Fibrosis Foundation, 2302 Parklake Drive NE, Suite 210, Atlanta, GA 30345
For more information: Call 404-325-6973 or Email: agilbert@cff.org