



**Contributor Information:**

Name of Donor (as it should appear in print) \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Contributor Category:**

Services     Tickets     Restaurants     Gi Card     Merchandise  
 Sports     Electronics     Travel     Underwriting     Other

**Item Information:**

Item: \_\_\_\_\_

Description of item: \_\_\_\_\_  
\_\_\_\_\_

Restrictions or Conditions: \_\_\_\_\_  
\_\_\_\_\_

- \_\_\_\_\_ Delivered to: EAS c/o Carissa Gudenkauf, Chair, 8903 Hannigan Court, Tampa, FL 33626-2976
- \_\_\_\_\_ Picked up by an Engineering Alumni Society Member  
                    Phone \_\_\_\_\_ Date/Time \_\_\_\_\_
- \_\_\_\_\_ Certificate enclosed

Solicitor's Name \_\_\_\_\_