

**ITEM NUMBER**

Southington Education Foundation  
P.O.Box 42  
Southington, CT 06489

Donor / Constituent Information  
(Please complete requested information in full)

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First Name

Last Name

Gender

Donor's Street Address

Marital Status : Married Single

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Spouse / Partner Name

--

Donor's City

--

State

--

Zip Code

--

--

Donor's Nickname

--

Spouse/Partner Nickname

Organization's Name and Address

Are you the main contact for the Organization? Y N

If not:

--

Email Address (required)

--

Contact Name and Position/Title

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Phone Number (Please Circle: Home Mobile Business)

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Please describe your affiliation with SEF ( i.e. Board Member, Volunteer, etc.)

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Name as you would like it to appear in the Auction Program and Printed Annual Report

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Donation Item

Value

Description and Special Conditions (i.e. Expiration, Terms of Use, Specific Dates for Use, etc.)

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**Please attach photos, brochures, menus or other display materials if appropriate. You may hand deliver or mail, with all accompanying materials and this completed form, your donation by September 11, 2015 to: Donna Gilewski-70 Alder Lane-Southington; telephone: (860) 621-6564**