



# A NIGHT WITH THE AZTECS

## THE EVENING OF FEBRUARY 21, 2008

### DONATION CONFIRMATION FORM

COMPANY/DONOR NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ FAX: \_\_\_\_\_

DONOR'S NAME EXACTLY AS IT SHOULD APPEAR IN THE PROGRAM:

\_\_\_\_\_

DESCRIPTION OF ITEM FOR THE PROGRAM:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RETAIL VALUE: \$ \_\_\_\_\_ (Required by the IRS)

ANY LIMITATIONS OR RESTRICTIONS?

\_\_\_\_\_

\_\_\_\_\_

IS THE ITEM/CERTIFICATE ENCLOSED? ☐ YES ☐ NO

WOULD YOU LIKE SDSU TO CREATE A GIFT CERTIFICATE FOR YOUR ITEM? ☐ YES ☐ NO

If yes who is to be listed as a contact?

SHOULD THE ITEM BE PICKED UP? ☐ YES ☐ NO

If yes, please fill in contact name and phone for pick-up:

WOULD YOU LIKE AN EVENT INVITATION TO BE SENT TO YOU AND/OR A BUSINESS? ☐ YES ☐ NO

If yes, please confirm a mailing address:

Donor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THANK YOU FOR YOUR SUPPORT!**  
**YOUR DONATION IS TAX DEDUCTIBLE!**

**SAN DIEGO STATE UNIVERSITY TAX ID NUMBER: 33-0868418**

Secured by: \_\_\_\_\_

(Committee Member's Signature)