



ITEM DONATION FORM

DONOR INFORMATION

DONOR NAME (To be recognized at gala): _____

CONTACT PERSON: _____ **BUSINESS NAME:** _____

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

PHONE NUMBER: _____ **EMAIL:** _____

ITEM INFORMATION

ITEM: _____

DETAILS: _____

RETAIL VALUE: _____ **RESTRICTIONS?:** ☐ YES ☐ NO

IF YES, PLEASE NOTE RESTRICTIONS: _____

ITEM EXPIRATION DATE: _____ **(REQUESTED EXPIRATION 11.22.26)**

ITEM DELIVERY

_____ **DONOR WILL MAIL TO STAR FOUNDATION AT PROVIDED ADDRESS BELOW**

_____ **DONOR WILL DELIVER TO STAR FOUNDATION BY** _____ **DATE. NO LATER THAN 11/1/25.**

_____ **DONOR WILL ARRANGE FOR A PICKUP AT COMPANY LOCATION**

DONOR'S SIGNATURE

DATE

RECIPIENT'S SIGNATURE

DATE

All contributions are tax-deductible within the limits provided by the law. After the event takes place, you will receive a thank you letter that will serve as your official tax receipt for your contribution. Star Foundation is a 501(c)(3) organization. Our tax identification number is 83-1151345. We are also registered with the Florida Department of Agriculture & Consumer Services charitable registration: #CH55827. A copy of our official registration and financial information may be obtained from the Division of Consumer Services by calling toll-free within the state. Registration does not imply endorsement, approval, or recommendation by the state. For more information, contact the Florida Department of Agriculture and Consumer Affairs at 1.800.435.7352 or visit freshfromflorida.com

★ **STAR FOUNDATION**
★ **ATTN: SHERYL ROSIN**
★ **4690 SOUTH DIXIE HIGHWAY**
★ **WEST PALM BEACH, FL 33405**

561-515-6468
CONTACT@OURSTARFOUNDATION.ORG
WWW.OURSTARFOUNDATION.ORG
501(C)(3) ORGANIZATION