



HAVE IT YOUR WAY®
FOUNDATION

In-Kind Donation Form

Donor Name: _____

Company Name: _____

Donor Representative: _____

Address: _____

City: _____ State: _____ Zip: _____

Tel: _____ Fax: _____ E-mail: _____

Please provide a description of the donated item (be specific and include all necessary information and details such as, dates, sizes, restrictions, pieces, etc.) _____

Value of donated item (required): \$ _____

The item is going to be: mailed delivered

**This donation becomes the property of the HAVE IT YOUR WAY® Foundation and is to be offered for sale at an auction, the proceeds of which will benefit the Foundation.

Donor representative: _____ Date: _____

Signature

In-kind donation items need to be mailed or delivered to the address below. Please submit an image of the item in a JPEG format to acento@whopper.com.

HAVE IT YOUR WAY® Foundation
Attn: Arianne Cento
5505 Blue Lagoon Drive
Miami, FL 33126
Phone: (305) 378-3858 / Fax: (305) 378-7868