



**Fired Up Fundraising!
Full Day Seminar
September 27, 2019
Holiday Inn, Boardman**

Sponsorship Response Form

Section 1

Donor (as it should appear in print material) _____

Contact person _____

Address _____

City _____ State _____ Zip _____

Business Telephone _____ Cell Phone _____

E-mail _____

Organization web address _____

Section 2

Sponsorship Level _____

Sponsorship \$ _____

Is this donation anonymous? ☐ NO ☐ YES

Donor Signature _____ Date _____

Please mail this completed form and payment made payable to **AFP Mahoning/Shenango** to:

AFP Mahoning/Shenango
PO Box 672
Youngstown, OH 44501

Questions? Contact JoAnn Stock, CFRE at 330-519-0395 or at jstock@stambaughauditorium.com

FOR OFFICE USE ONLY (INITIALS/DATE)

Donation received _____ Thank you _____