



Lone Star Pony Express

13th Annual BBQ Cook-Off & Trail Ride

April 29, 2017

ITEM # _____

Please **PRINT** or **TYPE** all information.

Date: _____

Name of Donor (as it should be listed in the program)

Contact Person for Donation

Address

City, State, Zip Code

Phone Number (area code first)

Contributor's Signature

Contributor 's E-Mail

Description of Item:

Restrictions, if any:

Value (\$):

Does Item need pick-up services? _____ yes _____ no

Name of Solicitor: _____ Phone #: _____

Contact Gina Marx at (817) 312-5845 or gina@roundupforautism.org
Autism Treatment Center & Roundup for Autism are 501(c)(3) corporations

Please make a copy for your records

www.roundupforautism.org