

# 2019 SPONSORSHIP COMMITMENT

## ORLANDO SIGNATURE CHEFS AUCTION ORLANDO

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Company name/donor

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Please indicate how you wish to be listed on printed materials

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Primary contact

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Address

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City  
code

State

ZIP

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Phone

Fax

Email

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Alternate contact

Person

Email

- YES, we will support March of Dimes as a sponsor  
in the amount of \$ \_\_\_\_\_ .
- I am unable to attend but I would like to make a 100% tax-deductible Tribute Gift  
in the amount of \$ \_\_\_\_\_ .

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Signature of primary contact

Date

*(My signature indicates authorization to make this commitment on behalf of my company.)*

**Payment options (payment is due no later than 30 days prior to event please):**

- Check enclosed (payable to March of Dimes)
- Credit card

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Credit card number  
Security code

Expiration date

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Name as it appears on card

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Billing address (if different from above)

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Signature of card holder

**Please send payment to our Centralize Accounts Team:**

March of Dimes Foundation  
Donation Processing Center  
PO Box 18819  
Atlanta, GA 31126

**Questions or details about the event contact:**

**Kelley Harrell**

**Senior Development Manager**

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