Michael Magro Foundation Prize Patrol
DONOR RESPONSE FORM

☐ I am pleased to donate the following brand new gift items to the Foundation for use in its fundraising activities.

O I am pleased to donate a gift card to be used for fundraising activities

ITEM (s): RETAIL VALUE

_____ _____
_____ _____
_____ _____

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP _____

PHONE: ( )_____FAX: ( ) _____

E-MAIL: _____

☐ Please print your name as you would like it to appear on our Event Gift Acknowledgement Page:

_____

☐ I can provide delivery to the Foundation Office
12 Julian Street Hicksville, NY 11801

☐ please call me to arrange for pick-up.

If you have questions, please contact Terrie Magro at
mmagrofoundation@yahoo.com

You may return this form to the Michael Magro Foundation office via return e-mail
or fax at 516 -827-5152 **cell #: 516-633-5341**