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The 2019 Superintendent's Cup  
 July 18, 2019  
 www.apseducationfoundation.org

**Donation Deadline is July 12, 2018**

Donor Name / Company				Contact Name & Phone Number for Follow-Up	
Donor Name to be listed in Promotional Materials					
Address/Street		City	State	Zip	Phone Number:
					Fax Number:
					E-Mail:
Description of Donated Item(s). Please be as specific and detailed as possible.					Donor Stated Value
					\$
Restrictions: <i>Please state any limitations, blackout dates, deadlines, advance notices or other special restrictions.</i>					
<p><b>Please provide any additional collateral you would like us to use to market your business/product!</b>          For example: Brochure, business cards, etc.</p>					

**ITEM COLLECTION:**

- Item accompanies donor form
- Please pick up my donation
- Please create a gift certificate for my donation

**TAX INFORMATION:**

**501c3 -Tax ID # 85-0434438**

**Signature of donor:** \_\_\_\_\_

**THANK YOU**  
 for donating to the  
**2019 Superintendent's Cup**  
 benefiting the  
**APS Education Foundation**

<i>For Office Use Only</i>	
Procurement #	_____
Item Received	_____