

ITEM INFORMATION					
Item Name					
Item Description (Include quantity, size, color, number of persons, weeks, days, nights and					
ALL RESTRICTIONS)					
Donor Estimated Value (required)					
Donor Signature				Date	
DONOR INFORMATION					
Donor Name					
Donor Contact Name					
Street					
City		State		Zip	
Telephone		Email			
DATE FILLED OUT		PROCURED BY			
ITEM LOCATION	☐ Item accompanied form☐ Donor will deliver item by:	☐ Item needs to	be picked up		
ITEM CERTIFICATE & DISPLAY		ate 🔲 BCF will create the certificate ional material to display with the item or certificate			

Thank you for your generosity!

PLEASE COMPLETE AND SUBMITTHIS FORM BY MARCH 10, 2025

email to foundationevents@bellevuecollege.edu or mail to 3000 Landerholm Circle SE, #A101, Bellevue, WA 98007

Your donation may be tax-deductible. Federal Tax ID # 91-1051671

bellevuecollege.ejoinme.org/golf

EVENT PROCEEDS SUPPORT BC ATHLETICS SCHOLARSHIPS