## **Patrons Ball**

DONATION FORM	
Business Name:	
Contact Person:	
Address:	
City:	State: Zip:
Phone:	Fax:
Email:	
Web site Address:	
Donor Estimated "Retail Value" of Donation: \$_	
Desired Listing for Recognition Purposes:	
Description of Donation:	
	and ready to hang.)
Signature of Donor:	
Date of Donation:	
We sincerely appreciate your generous contribution	on to the Buffalo Bill Center of the West.
	enter of the West. The Auction Item Donation Deadline is September 9. ight to apply donated items to the Buffalo Bill Invitational Shootout, iate. Thank you for your donation.
Please send this completed DONOR FORM along	g with your donation to:
Attention: Development Office Buffalo Bill Center of the West	
720 Sheridan Avenue	
Cody, WY 82414–3428	