



The undersigned agree(s) to donate to the Port Aransas Education Foundation (PAEF) the following item(s) or service(s):

Description: \_\_\_\_\_  
\_\_\_\_\_

Approximate Value of Item or Service: \$ \_\_\_\_\_

The donation/service is Personal \_\_\_\_\_ from my Company \_\_\_\_\_

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

The donor further agrees the use of this gift is left to the discretion of the PAEF.

Signature: \_\_\_\_\_ By: \_\_\_\_\_  
.....

\_\_\_\_\_ Please have a representative of PAEF call me concerning the pick up and delivery of my donation. My phone no.: \_\_\_\_\_.

\_\_\_\_\_ Please have a representative of PAEF call me concerning a donation. My phone no.: \_\_\_\_\_.

\_\_\_\_\_ I do not have an item or service to donate at this time; however, I would like to contribute the following amount: \$\_\_\_\_\_. Please make checks payable to: Port Aransas Education Foundation, P.O. Box 95, Port Aransas, TX 78373 (361) 749-7126.

*Your contribution to PAEF, a 501(C)(3) non-profit organization, may be fully tax deductible. Please consult your tax preparer CPA.*

**Mission**

The Port Aransas Education Foundation is committed to actively seeking community support to promote educational excellence within the Port Aransas Independent School District.