

**Vendor Donation Form**  
 A LUNgevity Foundation Event  
 Saturday, November 10, 2012  
 Breathe Deep Atlanta



Thank you for making Breathe Deep Atlanta a success! If you would like to have an on-site table/tables to promote your company or business at the event, please fill out this form in its entirety and submit via mail/fax with your required donation amount. Print clearly to ensure that your vendor donation is processed accurately and quickly.

Full Vendor Name \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Website URL <http://www.> \_\_\_\_\_

Please indicate donation level-Required		
1 Table	\$250	
2 Tables	\$400	
CUSTOM (contact coordinator at <a href="mailto:atlanta@lungevity.org">atlanta@lungevity.org</a> )		

**Benefits:**

Will you take advantage of the vendor donation benefits that use your company logo or name? All vendor donors receive the benefit of a listing on the event website.

\_\_\_\_\_ Yes, I have a company logo and will be submitting it to [logos@lungevity.org](mailto:logos@lungevity.org). Vector files (.eps .pdf .ai) are best, but large format artwork (.jpg .gif .tif) is also acceptable.

\_\_\_\_\_ Yes, but I will **not** be submitting a logo. Please use my full donor name as indicated:

\_\_\_\_\_

\_\_\_\_\_ No, I want my vendor donation to be anonymous and decline all donor benefits that use a company logo or name.

Mail this form to:

Breathe Deep Atlanta c/o LUNgevity Foundation at 435 North LaSalle Street, Suite 310,  
 Chicago, Illinois 60654, or fax it to 312-464-0737.

**For more information, contact [atlanta@lungevity.org](mailto:atlanta@lungevity.org) or call 312-464-0716.**

*LUNgevity Foundation is a 501(c)(3) nonprofit organization (FEIN 36-4433410).*

*This donation is tax-deductible to the full extent provided by law.*