

Gift Donation Proposal

Please complete the form below to begin the gift proposal process. All proposals will be reviewed by the Patrons of The Nixon Centre Gift Acceptance Committee.

| Name of Donor: | |
|--|---|
| Address: | |
| Email: | Cell Phone: |
| Gift for Donation: | |
| Description and Details of the item in | cluding Artist: |
| | |
| | |
| | |
| | |
| Estimated Value of the Item: \$ | |
| Please include any supporting docum | entation or paperwork on the gift item. |

By signing this proposal, I acknowledge that I have read and agree with the Patrons of The Nixon Centre Gift Acceptance Policy and Guidelines. All decisions made by the Patrons of The Nixon Centre Gift Acceptance Committee are final. You will be notified of our decision in writing once a decision is made regarding your gift proposal.

| Donor Signature: | Date: |
|-----------------------------------|---|
| Completed form and any supporting | documents should be returned via mail to: |
| Patrons of the Centre, Inc. | |
| P.O. Box 1422 | |

Newnan, Georgia 30264