

Donation Sponsorship Form



Company Name: _____

Contact Name/Title: _____

Address: _____ **City:** _____

Zip Code: _____ **Phone:** _____

Fax: _____ **E-mail:** _____

Donation Amount: _____

Names of Volunteers: _____

**Make checks payable to:
Liberty Hill Housing Corporation
Mail to:
LHHC
Spring Fling
P.O. Box 313
Wayne, MI. 48184**

Along with the donation form, please e-mail company logo to:

tdevon@comlivserv.com.

For more information, please call Joan Flatt at 734-722-7233