



15th ANNUAL 2010 Midwest Winefest

Donor Form - Wine

a benefit for the Guadalupe Health Foundation

940 S. St. Francis • Wichita, KS 67211
316-264-8974 • FAX 316-262-4938

DONATION DEADLINE: March 31, 2010

Name/Business as it should appear in showbook _____
 Contact Name (if different from above) _____
 Address _____
 City/State/Zip _____ Phone Number _____

Deliver: ___ Item needs to be picked up
 ___ Item to be delivered by donor by _____ (date)
 ___ Item accompanies form

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				G C S I
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				

Tax receipts will be issued for the full appraised value of donated wine, goods, or services, and cash donations.

Thank you for supporting Guadalupe Health Foundation!

For office use only:

Tax I.D. # 20-1344137

Volunteer Contact	Telephone	Notes	Acknowledgement	Tracking #

2010 Midwest Winefest

Donor Form - Wine Only Page 2

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				

Vintage	Qty.	Size	Description of Donated Wines:	Fair Mkt Value	Total \$	Lot #	Inspected
			Name of wine: _____				
			County & Region: _____				
			Village/Vineyard (or grape variety): _____				
			Producer/Shipper: _____				
			Appellation: _____				
			Rated By: _____				
			Points: _____				