



# International Taste of Greenville

*benefiting*

**James and Connie Maynard Children’s Hospital  
at Vidant Medical Center**

***“For the Love of Children”***

Thursday, April 19, 2018

Hilton Greenville

## Sponsorship Commitment Form

*\*please return this form by April 13, 2018\**

Corporation/Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Amount of Sponsorship Donation: \_\_\_\_\_

Signature: \_\_\_\_\_

### Payment

Check enclosed

Check being sent later

Bill me

*Checks made payable to The Community Foundation of NC East and mailed to  
625 Lynndale Court Suite A, Greenville, NC 27858 with notation ‘ITOG’*

Pay with a credit card (American Express, Visa, Mastercard or Discover)

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Billing address (if different than above): \_\_\_\_\_

**\*\*a copy of your company’s logo should be emailed to [maggie@growatpip.com](mailto:maggie@growatpip.com)  
Logo specs. jpeg 300 DPI or Vector.pdf**

*The International Taste of Greenville is a charitable fund of The Community Foundation of NC East.  
Tax ID: 56-2152669. Checks made payable to The Community Foundation of NC East and mailed to  
625 Lynndale Court Suite A, Greenville, NC 27858.*

