



ASBC
P.O. Box 270300
LOUISVILLE, CO 80027-5004

AUTISM SOCIETY OF BOULDER COUNTY

PROMOTING EDUCATION & AWARENESS
A CHARITABLE NON-PROFIT ORGANIZATION - EIN 20-0574440

PHONE: 720-272-8231
FAX: 303-604-6656
info@autismboulder.org
www.autismboulder.org

January 2008

Dear Donor:

On behalf of Autism Society of Boulder County, I would like to express my sincere thanks for your generous donated item listed below as a contribution towards this year's 5th Annual Wine Tasting & Silent Auction event. These funds will allow our organization to continue our on-going community awareness programs, resource and information support. In supporting this event, you will aid in raising awareness in our community of an ASD individual's needs and value to society.

Please keep the upper portion as a receipt for your tax records. Please fill out and tear off the lower portion and send it with your donation

Business Name _____

Address _____

Description of Donated Item: _____

Donor Estimated Value _____

We extend our deepest gratitude and hope we can count on your support in the future.

Warm Regards,

Autism Society of Boulder County

(Tear Here)

Contact Name _____

Business Name _____

Address _____

Email _____ Phone Number _____

Description of Donation _____

Value _____