



California State Horsemen's Association

Tami Sandberg, State Trail Trials Chairman
C/O 10065 North Star Drive
Redding, CA 96003

**NORTHERN AREA STATE BENEFIT
DONATION, SPONSORSHIP,
CONTRIBUTION**

Thank you, for your generous contribution to our program. It is because of supporters like yourself that our organization is able to continue to offer positive opportunities to our equestrian community.

In thanks for your support of our program your name will be listed as a sponsor, contributor and/or donator.

Thank you again for your support.

Your Sponsorship is greatly appreciated.

Champion	<u>80.00</u>	Qty _____	\$ _____
Reserve	<u>\$ 50.00</u>	Qty _____	\$ _____
Ribbons 1-6 Place	Saturday \$130.00	Sunday \$130.00	_____

(Note: you may co-sponsor with another person)

Please make your checks out to, CSHA and mail to Tami Sandberg at address above.

Remember that your contribution, sponsorship and/or donation are tax deductible. Our Tax ID # is 94-1091755 DLN: #602136125.

Sincerely,





**CALIFORNIA STATE HORSEMEN'S ASSOCIATION
TRAIL TRIALS PROGRAM
RECORD OF DONATION / SPONSORSHIP**

Name: _____

Company: _____

Address: _____

City State Zip Code

Phone: (_____) _____

Type of Contribution: Sponsorship Amount \$ _____

Donation Amount \$ _____

Other _____

Description: _____

Received by: _____ Region Date

The Purpose of this document is to record the donation / sponsorship received.

