

# 2023 COBA Showcase House Contribution Form

Business name

Contact person

Street address

City

State

Zip code

Phone

Website

E-mail address

Contribution Level

Total Contribution  
Amount

PO Amount

Material / Labor Description

Payment

If applicable, the contribution amount above will be deducted from the PO total for the job.

Tax ID #

Credit Card #

Expiration

Zip code

**Signature**

Date

By signing, the company agrees to provide materials &/or labor as described above by the scheduled date for delivery.  
Cash contributions should accompany this form.

**Return form to: Mandy Weidman | [mandyw@coba.org](mailto:mandyw@coba.org) | 541-389-1058**  
**COBA TIN: 93-0763605**