

This organization partnership commitment is intended to provide a TOTAL of \$______to the CEIR Foundation in support of research, education and scholarship programs.

This commitment will be paid according to the schedule below.

CEIRF Note: Payments may be made annually, semi-annually or quarterly. Please complete the following payment schedule with amounts intended by period and specific dates if required. Invoices will be sent by CEIRF with payment options included.

Year	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter
2024				
2025				
2026				
2027				
2028				

Please indicate how you would prefer your company name to be listed for recognition purposes:

(NOTE: Amounts of \$25,000 USD or more are recognized with a company logo)

Additional Instructions: (Please indicate your URL for hyperlink of corporate logo from the CEIR Website)

Signature and Contact Information:				
Signature:		Date:		
Print Name:				
		Work Phone:		
Company Name:				
State/Province:	Postal Code:	Country:		
Accounting Contact (full name):				
Accounting Contact Email:				
	CEIR Foundation Contact Information			
	Cynthia Herring, Controller 12700 Park Central Drive, Suite 308 Dallas, TX USA 75251			
	E <u>cherring@ceir.org</u> www.ceir.org			