

Auction Donation Contract

Date Submitted: _____

DONOR INFORMATION:

Donor Name: _____

Company/ Organization: _____

Company Contact: _____ Donor Website: _____

Address: _____ Donor E-mail: _____

City, State & Zip: _____

Phone Number: _____ Fax Number: _____

Donor Signature: _____

DONATION DESCRIPTION:

Restrictions: _____

Expiration Date: _____ Declared Value: _____ Cash Donation: _____

Please check appropriate box:

- Item(s) needs to be picked up by _____
- Item(s) will be delivered by April 22, 2022
- Item(s) enclosed
- Certificate enclosed

SPECIAL REQUESTS OR COMMENTS:

MONETARY DONATION: choose one

Credit Card# _____ Exp. _____ CCV _____ Zip Code _____

Check # _____ (enclosed)

