



2015 Silent Auction
OCTOBER 10, 2015
at Bridgewater Place

AUCTION ITEM DONATION FORM

Donor Name/Company to be listed:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Website:

Contact Information for Redemption or Follow-Up

Name: _____ Company: _____

Phone: _____ Email: _____

Donation Description: Help us sell your item! Description must be written by the donor organization.

Restrictions/Special Instructions: Please state any limitations, blackout dates, deadlines, advance notices or other special requirements.

Retail Value: \$ _____

Estimated Shipping \$ _____

TOTAL: \$ _____

Your donation is tax deductible.

Signature of Donor: _____ Date: _____