

(include an event or corporate logo)

# Your Organization's Name Here

*Your Organization's Mission Statement Here*

Event Name

Event Date and Information

Thank you for your making a contribution to our silent auction. Please complete this form and email or fax to (insert contact name here), Auction Chair at (insert phone and email).

**Donor Name:** \_\_\_\_\_

**Organization name:** \_\_\_\_\_

**Mailing address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Please provide a brief description of the item you are donating:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please provide an approximate retail value: \$** \_\_\_\_\_

*We appreciate your Support!*

*Thank you!*