

Auction Donation Form

Please complete this form and mail or email by **September 14, 2026** to the address below.

Contact Information

Contact Name _____

Company/Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

How would you like your name (or company name) listed on auction materials? _____

Contributed Item(s)

Please give a detailed description of the item(s) being contributed.

List any restrictions, deadlines, expiration and/or blackout dates.

Item and Estimated Value _____

Please Check

- Item(s) are included with this form Item(s) will be delivered on _____ Please create certificate
 Item(s) need to be picked up

Pick-up Contact Name _____

Pick-up Address/Location _____

Phone _____ Email _____

Solicitor _____