

Auction Contribution Form

I would like to donate the following gift(s) to the March of Dimes: _____

Detailed item description: _____

Retail value: \$ _____ Is item exchangeable? Yes No Expiration date: _____

Special instructions and/or restrictions: _____

Please print company or individual name as you would like it to appear in the auction program: _____

(Deadline for inclusion in printed program is **Friday, August 28, 2016**)

Item delivery method:

- ☐ I will messenger or mail gift to March of Dimes office by _____.
- ☐ I will have gift available for pick-up anytime after _____.
- ☐ I would like the March of Dimes to generate a certificate.
- ☐ Certificate/item is attached.

Donating company/individual:

Name: _____

Contact person (if different from donor): _____ Title: _____

Mailing address: _____ Email: _____

_____ Phone Number: _____

Signature: _____

Date: _____

Please Return This Contract To:

March of Dimes Foundation
Attn: Signature Chefs Auction
555 Winderly Place, Suite 105
Maitland, FL 32751

Phone: (321) 426-6230 • Fax: (321) 775-0208

Please make a copy of this contract for your records.
Thank you for your donation!
Tax ID #13-1846366