

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:

Item delivery method:

- I will deliver or mail the gift(s) to the March of Dimes office by _____.
- I will have the gift(s) available for pick-up any time after _____.
- I would like the March of Dimes to generate a certificate on my behalf.
- Certificate/item is attached/included.

Donating company/individual:

Name: _____

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

Mailing address: _____ Email: _____

_____ Phone Number: _____

Signature: _____ Date: _____

In order to receive recognition for your contribution, please submit this agreement by Friday, October 14, 2016.

March of Dimes Foundation

Attn: Victoria Vighetto

555 Winderley Place, Suite 105

Maitland, FL 32751

Phone: (321) 274-8675 • Email: vvighetto@marchofdimes.org

Please make a copy of this agreement for your records.

Thank you for your donation!

Tax ID #13-1846366