



**Metro  
Speech-  
Language  
Network**

<b>FOR OFFICE USE ONLY</b>	ITEM#: _____
CATEGORY: _____	
# OF PIECES: _____	
ITEM RECEIVED _____	DATE _____
COMMITTEE PICK UP _____	
DONOR WILL DELIVER _____	
THANK YOU SENT _____	
CERTIFICATE _____	ATTACHED _____ MUST BE MADE

**Auction Donation Form**  
**Metro Speech - Language Network**  
**PO Box 3946**  
**Greenwood Village, CO 80155**

ONLY ONE ITEM PER CONTRACT  
(PLEASE PRINT – USE A BALL POINT PEN)

DUE BACK BY: \_\_\_\_\_

DATE: \_\_\_\_\_

DONATED BY: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

ITEM: \_\_\_\_\_

DONOR STATED VALUE: \_\_\_\_\_

COLOR: \_\_\_\_\_

SIZE OR DIMENSION: \_\_\_\_\_ ITEM EXCHANGEABLE: (YES)(NO): \_\_\_\_\_

DETAILED DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RESTRICTIONS IF APPLICABLE (INCLUDING AGE RESTRICTIONS AND EXPIRATION DATES): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

_____
SOLICITOR'S NAME
_____
SOLICITOR'S SIGNATURE
_____
SOLICITOR'S PHONE NUMBER

_____
<b>DONOR'S SIGNATURE:</b>

Federal Tax ID: 26-3345342  
Colorado Sales Tax Exemption 98-19942-0000  
White – Original    Yellow – Purchaser Copy  
Pink – Donor Copy

Donations become the property of Metro Speech – Language Network and will be offered for sale at auction. Proceeds benefit Metro Speech – Language Network. Any unsold items will remain the property of Metro Speech – Language Network. The donor may deduct contributions as provided in section 170 of the Internal Revenue Code and to the extent that the contribution is a gift, with no consideration received.