



FOR OFFICE USE ONLY 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
P.O. Box 330009
Northglenn, CO 80233-0009

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

DONOR'S SIGNATURE:

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.