

Donor Name *(as it should appear in catalog)* _____ Phone _____

Contact Name *(for arrangements)* _____ Email _____

Address _____ City _____ State _____ Zip _____

I wish to remain anonymous **OR** I wish to be listed in the catalog as: _____

Donor's Estimate of Value \$ _____ Cash donation in the amount of \$ _____

Full Description of Gift* *(Include quantity, size, color, # of rooms, # of persons, limitations, if any)* _____ Expiration Date or Other Restrictions _____

- Please Check One: Item & certificate delivered with form
 Please prepare a certificate for my item
 I will deliver my item by _____
 Please arrange for pick-up of my item
 I have enclosed brochures, photo(s), and/or display materials

KWCS has my permission to create
a certificate for this item

(initials of Donor)

Procured by _____ Phone _____ Date _____

**Gifts of Service are not tax-deductible. KW's reserves the right to package together or separate donations depending on what is best for the auction and event committee*

Office use only: Item # _____ Auction Catalog #: _____

Entered Tagged Solicitor _____ Category: Adopt A Basket Class Project: _____