

## **AUCTION ITEM DONATION FORM**



DATE

## Have A ♥ NAPA CARE 2018 Silent Auction

Benefiting the "NAPA Care" Emergency Benevolent Fund

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## **DONOR INFORMATION** Please print your name as you would like it to appear in the auction catalog (company, individual, Mr. & Mrs., etc.) NAME COMPANY **ADDRESS** CITY / STATE / ZIP EMAIL ADDRESS **PHONE** Please check here if you would like your donation to be anonymous. **DONATED ITEM DESCRIPTION** NAME OF DONATED ITEM VALUE OF DONATION SUGGESTED MINIMUM BID FOR ITEM Please provide details about the item you wish to donate: size, color, historical value or other description, name of artist, etc. If the item is a trip or lodging package, please indicate how many participants are included, length of time, any restrictions, travel limitations, whether the trip can be re-gifted or is transferable, or any other pertinent information. Please provide several good-quality photographs of your donated item for use on the website.

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