

# Auction Item Submission Form

Member Name: \_\_\_\_\_

**Contributor Information:**

Note: This section must be completed in its entirety. Failure to do so will result in the donor not being recognized for their donation. Do not forget the ZIP CODE! If you are the donor, please complete the lower portion as well.

Company Name: \_\_\_\_\_

Contact (First and Last Name): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone, E-mail: \_\_\_\_\_

**Item Information:**

Note: Please write legibly. The description written below will be published exactly as it is written in the auction program and on the table bid sheets.

Category (circle one):

- Art&Collectables    Clothing    Dining Out    Food    Garden    Housewares    Industrial/Auto
- Jewelry    Office Equip/Computer    Professional Services    Sports    Travel & Entertainment    Live Auction

Brief Description:  
(less than 10 words) \_\_\_\_\_

Long Description:  
(less than 25 words) \_\_\_\_\_

Value: \$ \_\_\_\_\_

Certificate?: \_\_\_\_\_

**This section for inventory chair completion only - Please leave blank**

Received? <small>(Date)</small>	Certificate?	Taxable?	Cont ID
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