

BENEFIT AUCTION  
ACQUISITION CONTRACT



**Benefit Acquisition Contract | Thank you for your generous support!**

DATE \_\_\_\_\_

DONOR NAME \_\_\_\_\_  
*(Print name exactly as it should appear in the magazine)*

CONTACT PERSON \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY • STATE • ZIP \_\_\_\_\_

TEL • FAX • EMAIL \_\_\_\_\_

• PLEASE PROVIDE THE FOLLOWING INFORMATION:

ESTIMATED FAIR MARKET VALUE *(Gifts to the Benefit Auction are tax-deductible to the extent provided by law.)* \$ \_\_\_\_\_

IMPORTANT DETAILS • DESCRIPTION

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• PLEASE NOTE: *Members of the benefit team are responsible for auction placement and opening bid amounts.*

SPECIFY DELIVERY OF ITEM *(For vouchers or gift certificates: please include donor's letter or certificate to guarantee redemption of this gift.)*

\_\_\_\_\_

RESTRICTIONS *(Such as limitations, maximum amounts, costs not covered, # of guests, blackout dates, etc.)*

\_\_\_\_\_

\_\_\_\_\_

*Donation acknowledgment letters will be mailed in January and June.*