



MAZAMAS AUCTION DONOR FORM

Mazamas
 527 SE 43rd Ave
 Portland, OR 97215-1608
 Phone: 503-227-2345
 Fax: 503-227-0862

Solicitor: _____

Date: _____

Office use only: Item # _____

ITEM: _____ Retail value: _____

PICKUP/DELIVERY INFORMATION

ITEM

____ Item received

____ Donor will deliver to Mazamas office or solicitor by date _____

____ Mazamas will pick up from donor- when/where: _____

GIFT CERTIFICATE

____ Certificate received

____ Donor will deliver/mail to Mazamas or solicitor by November 3, 2007.

____ Mazamas will generate Certificate

Expiration Date: _____

Donor/company name: _____ Phone: _____

Contact person: _____ Fax: _____

Address: _____

Donor/company name for listing: _____

Anonymous donation: ____ Yes Email: _____

DONATION INFORMATION: (As it is to appear on the listing)

Donated item: (Please include as much detail as possible so we can have an accurate description in our written materials. Also, please provide any promotional material - brochures, advertisement pieces, logos, etc, to display.)

Restrictions (Please specify any limitations): _____

____ Offer expires one year from auction date or Offer good from _____ thru _____

Thank you for your generous contribution to the Mazamas Auction!

All proceeds will go to the Mazamas general fund. No goods or services were provided in exchange for your contribution. This statement is provided to comply with the Internal Revenue Service code and will not be reflected in any annual statement from Mazamas.

Retain this donor receipt for your tax records. Mazamas reserves the right to package your donation.

Tax ID # 93-0408077

Original to office ____ Copy to donor ____ Copy to Committee ____