

**Auction Item Donation Form**  
*Please complete the below to donate*

**Donor Information: (Required)**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Business/Organization Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Donor Signature: \_\_\_\_\_ Staff/Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I wish to remain anonymous.  
Please do not list me in the program.

Please send me an invitation.  
I would like to attend the event.

I would like to learn about volunteer opportunities for DMARC.  
Please contact me.

*Deadline: To guarantee inclusion in the event program, this form must accompany the auction item by May 1*

<b>Item Information: (Required)</b>	<b>Fair Market Value (Required)</b>
Name of Item(s): _____	\$ _____
_____	\$ _____
Item Description (for event program):	
_____	
_____	
_____	

<b>Delivery Information: (Required)</b>	<b>Special Conditions/Restrictions:</b>
<input type="checkbox"/> Item accompanies donation form <input type="checkbox"/> Volunteer will pick up <input type="checkbox"/> Donor to deliver to event site (State Historical Museum) <input type="checkbox"/> Donor to deliver to DMARC office <input type="checkbox"/> Item requires a certificate to be made	_____ _____ _____
<b>We regret that we are unable to donate an item, but we would like to make a <u>contribution</u> of \$ _____</b>	

**Please allow this document to serve as receipt for your NON CASH contribution (to be completed by DMARC):**

**Donor DID NOT receive goods or services.** No goods or services were provided in consideration of this gift.

**Donor DID receive goods or services.** The amount deductible as a charitable contribution for income tax purposes is limited to the excess of the value of the contribution over the fair market value of goods and services provided by DMARC in consideration of this gift.  
 The fair market value of the goods and services provided was \$ \_\_\_\_\_. *Please consult your tax advisor with specific questions.*

<b>Office Use Only:</b>	Display materials to return: Yes ___ No ___	<i>Original – DMARC</i>
Tracking # _____	Catalog# _____ Auction Category: _____ Pkg. # _____	<i>Copy– to Donor</i>

*Thank you for your support! Questions? Please contact DMARC at (515) 277-6969*