



SILENT AUCTION DONATION FORM

Thank you for your donation! Completed forms are requested by March 15, 2010.
Please fax completed forms to (302) 656-8414 or e-mail to bpatterson@mealsonwheelsde.org

Donor or merchant name as you would like it acknowledged (*please print clearly*)

Contact name

Phone

Fax

Address

City

State

Zip

E-mail

DESCRIPTION OF ITEMS: Please be as specific as possible, and specify individual item values. Include details such as color, size, age, style, terms or any other information that will accurately describe the item. Brochures are helpful.

Estimated total fair market value*: _____

**We reserve the right to research and verify estimated fair market value for sales listing*

Cash contribution \$ _____

Total donation \$ _____

SPECIAL INSTRUCTIONS: Please note any and all exclusions, expirations dates and reservation needs. Certificates should be valid for a minimum of one year from date of event.

PLEASE CHECK IF APPLICABLE:

MERCHANDISE: Enclosed _____ Will be delivered _____ Needs to be picked up _____

DISPLAY MATERIALS: Enclosed _____ Will be provided _____ Needs to be picked up _____

A GIFT CERTIFICATE: Enclosed _____ Will be mailed _____

**Items can be delivered to the Meals On Wheels Delaware office. Address is below.*

DONOR SIGNATURE

DATE

PLEASE NOTE: Meals On Wheels Delaware gratefully acknowledges your donation. We reserve the right to auction donated items in the manor we feel will maximize contributions to the organization. You, the donor, will receive tax documentation via mail acknowledging the donation.