

# baltimore clayworks

## AUCTION DONOR FORM

Organization/Business \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State, Zip \_\_\_\_\_  
Work Number \_\_\_\_\_  
Mobile Number \_\_\_\_\_  
Fax Number \_\_\_\_\_  
E-Mail \_\_\_\_\_

Market Value of Donation

\_\_\_\_ Anonymous Donation

Donor name as it should appear in catalog: \_\_\_\_\_

**CASH CONTRIBUTION**      Amount \$ \_\_\_\_\_  
                                  \_\_\_ Check  
                                  \_\_\_ Credit Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ V Code: \_\_\_\_\_  
                                  \_\_\_ Invoice                      Send to: \_\_\_\_\_

**GIFT CERTIFICATE**      Value \$ \_\_\_\_\_  
                                  \_\_\_ Enclosed  
                                  \_\_\_ Donor will deliver by (date) \_\_\_\_\_  
                                  \_\_\_ Committee member will pickup by (date) \_\_\_\_\_

**ITEM DONATION**      \_\_\_ Enclosed  
                                  \_\_\_ Donor will deliver by (date) \_\_\_\_\_  
                                  \_\_\_ Committee member will pickup by (date) \_\_\_\_\_

### ITEM DESCRIPTION

Please give a complete description of donated item that will be used in catalog and publicity. Where applicable, please include size, color, materials, title, and any special instructions or restrictions.

\_\_\_\_\_  
\_\_\_\_\_

Baltimore Clayworks graciously acknowledges your contribution for our fundraising event. Baltimore Clayworks is a 501(c)3 non-profit organization. Your donation is tax deductible to the fullest extent of the law.

Donor Signature _____	Date 5707 Smith Avenue T: 410 578 1919 www.baltimoreclayworks.org	Baltimore Clayworks Representative Baltimore, Maryland 21209 F: 410 578 0058	Date _____
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