

Silent Auction Form

First deadline to enjoy full benefits accorded your auction items:

March 19

Final deadline to be included on pre-event silent auction:

April 9

NAME OF ITEM DON	OR (AS YOU'D LIKE IT T	TO APPEAR IN PUBLICATIO	NS)		
CONTACT NAME (IF	DIFFERENT FROM ABO	OVE)			
AFFILIATION/COMPAN	NY (AND/OR) TITLE				
ADDRESS			CITY	STATE	ZIP
PHONE			EMAIL		
JS ABOUT THE ITEM	I(S) YOU ARE DONA	TING TO THE AUCTION	ON:		
m #1					
TITLE (LIONALTHE ITEMA	IC DRODEDI VI ICTEDI:				
TITLE (HOW THE ITEM	IS PROPERLY LISTED):				
DESCRIPTION (HOW T	HE ITEM IS DESCRIBED	TO OPTIMIZE ITS APPEAL	_,75 WORDS):		
fair market value: _					
		SHIPPED	O 25111/5255		
SITEM WILL BE	() MAILED	SHIPPED	() DELIVERED		
S ITEM WILL BE	MAILED	SHIPPED	DELIVERED		
S ITEM WILL BE	MAILED	SHIPPED	DELIVERED		
\bigcirc	MAILED	SHIPPED	DELIVERED	PHONE	
CONTACT	MAILED		CITY	PHONE STATE	ZIP
CONTACT		ЭПІРРЕД			ZIP
CONTACT ADDRESS BEST TIME FOR PICK-L		ЭПІРРЕД			ZIP
CONTACT ADDRESS BEST TIME FOR PICK-L	JP			STATE	ZIP



HOURS FOR REDEMPTION ARE

TELL US ABOUT THE ITEM(S) YOU ARE DONATING TO THE AUCTION:

TITLE (HOW THE ITEM IS PROPERLY LISTED):

DESCRIPTION (HOW THE ITEM IS DESCRIBED TO OPTIMIZE ITS APPEAL, 75 WORDS):

FAIR MARKET VALUE:

By special advance arrangement items can be picked up

CONTACT

PHONE

ADDRESS

CITY

STATE

ZIP

//THIS ITEM CAN BE REDEEMED BY THE WINNING BIDDER WITH A CERTIFICATE ALDEA WILL ISSUE.

THE SITE FOR REDEMPTION IS _____

Aldea Children and Family Services is a 501 © 3 nonprofit organization. Our federal tax ID is: 94-2159248 . Our mission is to improve lives and create bright futures for people we serve by providing professional mental health, child welfare and support services in a manner that respects the dignity and individuality of each person.

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