

## 2017 Auction - PROCUREMENT FORM (Rotary #8)

Saturday, April 8th 2017 • Hotel Murano Bicentennial Pavilion

		Contact		
Donor/Business:		Person:		
Address:		City, State, Zip:		
Telephone Number:		E-mail:		
	I wish to remain anonymous			Charitable Trust Fund donation
Check one:	Cash Donation for Procurement Item: Item and/or Service Donation (provide de		(check	form of payment below)
☐ Bill my Rotary account (members only) ☐ Check attached ☐ Bill me at address above ☐ Use my credit card on file (members only)				
Short Description of Item:				RETAIL VALUE (Monetary value only, please):
☐ Item is a gift certifica			\$	
□ Other:			<b>\$_</b> i	
Detailed description of item/service for catalog/certificate (use back of form if additional space is needed):				
Restrictions – <u>list all</u> : (e	expiration date, hours, number of peop	le, age restrictions,	avail	ability, blackout dates, etc.)
☐ Donor will provide a	ctual item/certificate De	livery Date:		
☐ Item must be picked	up from donor Pic	ck Up Date:		
☐ Please create a certificate with the information provided above				
Signature of Donor		Date		
Donation Secured by:				