

## 2024 AUCTION - PROCUREMENT FORM (Rotary Club of Tacoma #8)

				,			
Donor/Business:			Contact Person:				
Address:			City, State, Zip:				
Telephone Number:			E-mail:				
I wish to remain anonymous				Charitable Trust Fund donation			
	Check one: Cash Donation \$ (check form of payment below)  Item and/or Service Donation (provide details below)  Committee Basket Donation						
Use my credit card on file (members only) Send me a bill (members only) Check attached Bill me at address above							
Short Description of Item:				RETAIL VALUE (Monetary value only, please):			
Item is a gift certificate to:				\$			
Other:				Ψ			
Detailed description of item/service for catalog/certificate (use back of form if additional space is needed)  Restrictions – <u>list all</u> : (expiration date, hours, number of people, age restrictions, availability, blackout dates, etc.)							
Donor will provide actu	al item/certificate	Delive	ery Date:				
Item must be picked up	from donor	Pick l	Jp Date:				
Please create a certific	ate with the informa	ation provided above					
Signature of Donor			Date				
Donation Secured by:							