

**SURVIVOR HELP NETWORK
SILENT AUCTION DONATION AGREEMENT**

Survivor Help Network Representative Making Request _____

PART I.

Name of Donor: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email Address: _____

Do you wish to be acknowledged in our event program? Yes _____ No _____

If yes, how would you like your company or organization listed?

****Please note: Survivor Help Network is a 501 (c) 3 organization. Tax ID # 56-2525258. Donation forms not received one week prior to the event may not be listed in the auction program due to printing deadlines.***

Description of donation: _____

Special limitations or restrictions: _____

Estimated value of donation: _____

PART II.

_____, hereby warrants that it/she/he has the right to give the property listed in Part I for Auction, that until its sale this property will be kept free of all liens, claims and encumbrances. That all Donors descriptions of the property and its origin are accurate and that there are no restrictions on Survivor Help Network to reproduce photographs or graphic representations on the Donor's description of the property. All warrants made herein shall survive the sale of item at Auction.

Donor's Signature: _____ Date: _____

PART III.

Donation accompanies this form? Yes _____ No _____

If no, please complete the following:

Pick up address: _____

Pick up instructions: _____

PART IV.

Item sold at auction for: _____. This represents your charitable donation. This contribution is tax deductible to the extent allowed by law.

Thank you for your generous contribution to the Survivor Help Network Fundraising Event. Please fax to 480.575.1438. If you have questions please call Alissa Scott at 480.215.2171 or Lisa Schultz at 602.376.2981. You may also email info@survivorhelpnetwork.org.