|  |
| --- |
| Please type or print in black or blue ink. |
| Donor’s Business Name: |
| Donor’s Contact Person: |
| Donor’s Address: |
|  |
| Donor’s Telephone Number: |
| This donor would like ticket information: 🞎 Yes 🞎 No |
| Estimated Retail Value of donation: $ |

C:\Users\snathlich\Documents\LOGO & SIGNATURES\YVCC logo.tif

**Auction Procurement Form**

Yakima Valley Community College

500 W Main St

Grandview, WA 98930

Phone: (509) 882-7007

Fax: (509) 882-7012

Tax ID: 91-0838681

Donations are tax deductible.

Please make a copy for your records.

|  |
| --- |
| **Donated Item Name as it should appear in Auction List (Brief Description):** |
| * Item 🞎 Cash – Designated 🞎 Cash – Undesignated |
| * Gift Certificate 🞎 Service Donation 🞎 Material item not displayed at auction |
| Detailed description of donation – include quantity, size, color, number of persons, weeks, days/nights and restrictions, if any. |
|  |
|  |
|  |
| Expiration Date: Restrictions: |
| ***For the donor’s records, this certifies the donor has received nothing of value in exchange for this contribution.*** |
| **CERTIFICATE INFORMATION** |
| Will you provide an original certificate to attach to this procurement form? 🞎 Yes 🞎 No |
| If answer is NO, do we have your permission to create an in house original certificate? 🞎 Yes 🞎 No |
| Do you want the Auction Committee to create a display certificate? 🞎 Yes 🞎 No |
| **DELIVERY INFORMATION** |
|  |
| Item to be delivered by donor? 🞎 Yes 🞎 No |
| Item to be picked up by auction representative? 🞎 Yes 🞎 No |
|  |
| Delivery or pick-up date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Donor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |