

Date of Auction _____



Item # _____

Blue Skies for Children's Annual Dinner & Charity Auction Donation Solicitation Form

Item Name: _____

Item Description: _____

Restrictions: _____

Item Expiration Date: _____ **Value:** \$ _____

Tangible Item

Tickets / Gift Card

Display Materials Available

Blue Skies to provide certificate

Notes/Attachments: _____

Donor Business: _____

Donor Name/Contact: _____

Donor Address: _____

Donor City: _____ **Zip:** _____

Donor Phone/Cell: _____ **Email:** _____

Vendor Business/Name: _____ Same as Donor

Address: _____ **City:** _____ **Zip:** _____

Donor Phone/Cell: _____ **Email:** _____

Item will need to be picked up Date ___/___/___

Item will be delivered

Minimum Bid Requirement \$ _____

Pledge Item (can sell more than one)

Blue Skies Rep: _____ **Date:** _____