



Jazzin' It Up Annual Concert & Auction

Saturday, March 10, 2012 at The Heathman Lodge

* Donation Form *

NAME TO BE LISTED IN CATALOG - Donor or Business Name	NAME OF GIFT ITEM:
CONTACT PERSON(S):	SIGNATURE & DATE:
TELEPHONE:	EMAIL ADDRESS:
MAILING ADDRESS:	CITY, STATE ZIP:
TYPE OF GIFT: <input type="checkbox"/> ITEM <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> CASH/CHECK \$ _____ <input type="checkbox"/> SAMPLE/DISPLAY CHECK #: _____	
ITEM DESCRIPTION (How to list in catalog): <i>Please list any restrictions and details such as color, size, quantity, brand, price per item, number of rooms/participants/nights, etc.</i> <i>Please provide any brochures, photographs or other display material. Please attach additional pages if needed.</i>	
<input type="checkbox"/> CERTIFICATE ATTACHED FOR AUCTION <input type="checkbox"/> PLEASE PREPARE A CERTIFICATE FOR AUCTION EXPIRATION DATE: _____ <small>UNLESS OTHERWISE SPECIFIED, ALL DONATIONS TO THE AUCTION WILL EXPIRE ONE YEAR FROM THE DATE OF THE EVENT.</small>	
VALUE OF DONATION: \$ _____ <small>THE VALUE OF THE DONATION IS REQUIRED TO CLAIM A TAX DEDUCTION. DONORS ARE RESPONSIBLE FOR COMPLYING WITH IRS REGULATIONS.</small>	
CHECK ALL THAT APPLY: <input type="checkbox"/> Item is enclosed <input type="checkbox"/> Date item will be delivered: _____ <input type="checkbox"/> Please arrange to pick up my item by: _____ <input type="checkbox"/> Enclosed are display materials <input type="checkbox"/> If requested, would you be willing to donate this item more than once? If so, we will call you.	PLEASE RETURN THIS FORM TO: Daybreak Youth Services 404 E. 15th Street, Suite # 6 Vancouver, WA 98663 (360) 635-4120 fax: (360) 635-4123 TAX ID: 91-1083936 Email: helpkids@daybreakinfo.org
DAYBREAK COMMITTEE MEMBER CONTACT:	

DATE COMPLETED DONATION FORM RECEIVED:

DATE ENTERED:

We thank you for your generous support!