Auction Donation Form

ALL DONATIONS MUST BE RECEIVED NO LATER THAN MARCH 20, 2020

Please attach this original form to donation item or certificate.

Donor (person(s) or business): _______________________________________________________

(Name as it will be reflected in auction catalog and on tax acknowledgment.)

Address: ___________________________________________________________________________
(street address) (city, state, zip)

Telephone: ___________________ Email: ___________________ Fax: _______________________

Donor is: ___Business       ___Individual

Contact (if different than donor): ______________________________________________________

Telephone: ___________________ Email: ___________________ Fax: _______________________

Donation: ________________________________ (Gift Certificate, Basket, Wine, Dinner, Travel, etc.)

Fair Market Value: ______________________

Title/Detailed Description:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Please include all relevant conditions, instructions and restrictions: dates, times, locations, sizes,
tickets/ guests, delivery, expiration and blackout dates, etc.

Donor’s Signature: ____________________________________________

Which DVMS class should receive credit for this donation (if applicable)?
_________________________________________________________________________________

For Internal Use Only:  Catalog #__________ / Category ____________

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