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| --- | --- | --- |
| http://sz0108.ev.mail.comcast.net/service/home/~/logo.jpg?auth=co&loc=en_US&id=35960&part=2  a 501(c)3 not-for-profit organization | **AUCTION PROCUREMENT FORM**  *Changes Parent Support Network*  P.O. Box 33211, Seattle WA 98133  [www.CPSN.org](http://www.cpsn.org/) ◊ 1-888-468-2620  CPSN Tax ID # 91-1737849 | **For Office Use Only**  **Item # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Package # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Donation Deadline: August 15, 2011 2011 Auction Event Date: October 15, 2011**

*For more information about the auction, email* [*changesinfo@gmail.com*](mailto:changesinfo@gmail.com)*, or call Marie at 206-271-3966*

*Instructions: To fill electronically, click where indicated and type, or to check boxes, click on box.*

***DONATION –***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Item name:** | | Click here to enter text. | | | | | | | |
| **Item type:** | | Click here to enter text. | | **Category:** | | | Click here to enter text. | | |
| **Certificate?** | | **☐** None | **☐** Included with form | | | **☐** Donor will send | | | **☐** Auction to generate |
| **Item Status:** | | **☐** Received | **☐** Donor will deliver | | | | | **☐** Arrange pickup on | |
| **Value:** | **$**Click here to enter text. | | **Value type:** | | **☐** Estimable | | | **☐** Priceless | |

**Detailed item description** *(for use in catalog listing)****:***

*(NOTE: NO ITEMS ON CONSIGNMENT • ITEMS TO BE USED AT ORGANIZATION’S DISCRETION TO MAXIMIZE BENEFIT • PLACEMENT IN SILENT OR LIVE AUCTION BY COMMITTEE)*

|  |  |  |  |
| --- | --- | --- | --- |
| Click here to enter text. | | | |
| **Item restrictions** *(dates/number of persons/weeks/days/nights, etc.)****:***  Click here to enter text. | | | |
| **Expiration date** *(if any)***:** | Click here to enter text. | | |
| **Please check appropriate boxes:** | | **☐** Item can be duplicated **X \_\_\_\_\_** *(how many times?)* | ☐ Item photo display included |

***DONOR –***

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** *(as it will appear in catalog)****:*** | | | | | Click here to enter text. | | | | | | |
| **Donor is:** | **☐** Business | **☐** Individual | | | **☐** Member | **☐** Alumni | | **☐ Anonymous? ☐** No **☐** Yes | | | |
| **Address:** | Click here to enter text. | | | | | | **City/State/Zip:** | | | | Click here to enter text. |
| **Phone:** | Click here to enter text. | | | | | | **Email:** | | Click here to enter text. | | |
| **Contact name** *(if a business)****:*** | | | Click here to enter text. | | | | | | | | |
| ***Please contact me about:*** | | | | **☐** Sending me an invitation to the auction | | | | | | **☐** Placing an ad in the auction catalog | |
| **☐** Sponsoring a table at the auction | | | | **☐** Volunteer opportunities for the auction | | | | | | **☐** Volunteer opportunities for organization | |

***SOLICITOR (CPSN Volunteer) –***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** | Click here to enter text. | **Group/affiliation:** | | Click here to enter text. |
| **Address:** | Click here to enter text. | **City/State/Zip:** | | Click here to enter text. |
| **Phone:** | Click here to enter text. | **Email:** | Click here to enter text. | |

*DONOR ACKNOWLEDGES THAT NOTHING OF VALUE HAS BEEN RECEIVED IN EXCHANGE FOR THIS DONATION*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Donor signature:** |  | | **Date:** | Click here to enter text. |
| **Name** *(please print)****:*** | | Click here to enter text. | | |