

EVERGREEN GALA

APRIL 25, 2021

AUCTION DONATION FORM

Please return completed form, via email to pnoel@evergreenhealthmonroe.com or via postal mail to the address below.

One item per form. Retain a copy of this completed form for your records.



DONOR INFORMATION

Donor Name:	Date:
Contact:	Telephone:
Address:	Email:
City, State, Zip:	Donor Signature: <input type="checkbox"/> Please send me an invitation to the Gala!

ITEM INFORMATION

Auction Item Name:	Donor Stated Retail Value: (We cannot assign value) \$
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Detailed Description: Include Quantity, Size, Color, Number Of Persons, Weeks, Days/Nights.

Expiration: No expiration Specific date _____ April 25, 2022 (One year from Gala date)

Include All Restrictions: Date-specific, blackout dates, item usage, tax and gratuity not included, etc. – if applicable

Mark Appropriate Boxes

- | | |
|--|--|
| <input type="checkbox"/> Item/certificate sent with form | <input type="checkbox"/> Donor provides Certificate |
| <input type="checkbox"/> Item needs to be picked up | <input type="checkbox"/> Foundation to Create Certificate |
| <input type="checkbox"/> I will deliver item or certificate to the Foundation before 3/26/2021 | <input type="checkbox"/> Promotional materials provided by Donor |

Thank you for supporting EvergreenHealth!

If you have any questions, please contact Paola Noel, Development Specialist at 360-794-7497 x6304. The Foundation will officially acknowledge your in-kind donation upon receipt. Once received, this donation becomes the property of the EvergreenHealth Foundation. Any unsold merchandise will be retained by the Foundation for future fundraising events.

EvergreenHealth Foundation is an IRS recognized 501(c) (3) organization. Tax ID: 91-1519430

MAILING ADDRESS: 12040 NE 128th St. MS# 5, Kirkland, WA 98034

PHYSICAL ADDRESS: 12333 NE 130th Ln. Ste. 300, Kirkland, WA 98034

FOR OFFICE USE ONLY

ML Item #: _____ GG Item: _____ RE Item: _____ Notes: _____