



# Auction/Raffle Item Donation Contract

Name (as it should appear in materials): \_\_\_\_\_

Primary Contact Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Donated Item and/or Service

The Event Committee reserves the right to categorize items, set minimum bids and/or combine items to create packages

**ITEM DESCRIPTION** (please include brochures, menus, photos, certificates or other materials)

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**RESTRICTIONS/EXPIRATION DATES** (donations are valid for 1 year from event unless otherwise stated)

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**ESTIMATED MARKET VALUE** (required) \$ \_\_\_\_\_

(select one)    Item Enclosed    Will Need Pick Up    Donor to Deliver    Form serves as Auction Certificate

**Please retain a copy of this form for your records and return the original to:**

Misty Ried, Campaign Director  
misty@dravetfoundation.org