

ENNIS CHAMBER OF COMMERCE

Annual Auction
PO Box 1177
Ennis, Texas 75120
972-878-2625

<u>Office Use Only</u>
Silent _____
Live _____
____BOOK
____AUCTIONPAY

Please fill out form accurately.

DONATED ITEM: _____

DONOR WILL BE CREDITED IN CATALOGUE AS:

MAILING ADDRESS: _____

CITY, STATE: _____ ZIP: _____

TELEPHONE: (____) _____

ATTENTION: _____

VALUE: \$ _____

COMPLETE DESCRIPTION: Include all facts for catalogue, description and publicity; i.e. interesting facts, model, unusual aspects, rarity, size, color, dates, etc.

LIMITATIONS: Number of persons; time of year; expiration date, excluded dates, geographical limitations; insurance required, etc.

WILL ITEM : **BE DELIVERED** **NEED TO BE PICKED UP?** DATE: _____

BY WHOM: _____

IS THERE A CERTIFICATE TO ACCOMPANY DONATION? **YES** **NO**

CHAMBER TO GENERATE CERTIFICATE?

PLEASE NOTE: The Auction Committee reserves the right to combine or split up items and the placement of items in the auction, at their discretion, if they feel it would make the item more marketable for auction purposes.

Signature of Donor: _____

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REQUEST RECEIPT? Your donation is NOT tax deductible.

THANK YOU FOR YOUR SUPPORT!!