



Auction/Gift-in-Kind Donation Form

Please print all information clearly

Date: _____

Contact Person at Business: _____

Phone: _____ Fax: _____

Email: _____

Donor Name to appear in printed materials: _____

Donor Name to appear on Thank You: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Card or Brochure for auction display. If available, attach to this form.

Check if visual must be returned.

Donation Value \$ _____ (Must be completed for tax purposes)

Category of item (check one)

Business provided gift certificate

COS Foundation created gift certificate

Travel/Vacation Home

Wine

Other item: _____

Description of item for publication. Please be specific and complete. List restrictions.

Pick-up instructions if item is not turned in with this form:

Contact: Dawnie Slabaugh

Phone: (530) 938-5373

Fax: (530) 938-5570

Email: foundation@siskiyous.edu

Return this completed form to:

College of the Siskiyous Foundation, 800 College Ave., Weed, CA 96094

Tax ID #94-3146801