A screen shot of a cell phone

Description automatically generated

AUCTION ITEM DONATION FORM

|  |  |  |
| --- | --- | --- |
| **Donor/Business:** | | |
| **Contact Person:** | | |
| **Address:** | | |
| **City:** | **State:** | **Zip:** |
| **Phone:** | **Email:** | |

|  |
| --- |
| **Donated Item Name:**  **Description and restrictions:**  (Please include all details such as quantity, size, color, number of persons, days/nights, expiration date and restrictions, if any.) |

|  |  |
| --- | --- |
| **Estimated Retail Value of Donated Item(s) $** | |
| Donor will deliver the physical item to the WIGA office  Delivery date:  Donor will provide a certificate to WIGA via mail or email  WIGA please create certificate with the information provided | |
| Donor Signature: | Date: |
| Donor Name as to be listed in print (if different than above): | |

DONORS: PLEASE MAKE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS

Please return this form to Linda Edwards at admin@washingtonindiangaming.org

or mail to: Washington Gaming Association | 525 Pear St. SE | Olympia WA 98501-2251

**Federal Tax ID# 91-2013217**