

## September 28, 2024 AUCTION DONATION FORM

Donor Name: (as it should be recognized)			
Contact Name:			
Mailing Address:			
	City:	State:	Zip:
Phone:	Phone: Fax:		
Email:			
Item Description: (F	Please be detailed.)	ESTIMATED R	ETAIL VALUE: \$
	How will this item make it to ACS?		
	Item will be mailed to the address belo		be mailed to the address below.
		Item enclosed.	
		NOL A LAI	ngible item. ACS may create a certificate for
		presentation purposes.  Item will be given to the following ACS staff or	
		voluntee	
Requirements and	<b>Restrictions:</b> (Expiration dates, ag	e limits, etc.)	
Signature:		Date:	
organization; federal	-	ir auction donation ha	ACS is a nonprofit 501(c)(3) is been received, you will be sent an n. Please submit this form and your
Tselan K	unian, ph. 404.316.7828	Attn: Tselan K	Cunian
	velopment Manager II	2640 Gentry Wa	lk Court
Tselar	n.Kunian@cancer.org	Cumming, GA	

Thank you for making a difference with your contribution to the American Cancer Society!

Tax ID: 13-1788491



To learn more, please visit www.HopeBall.org