



**Sammamish Christian School
and Noah's Ark Preschool**
4221-B 228th Avenue SE, Issaquah, Washington 98029
Phone 425 392 7470 ~ Fax 425 392 3395
www.scsna.org

Tax I.D. No. 91-2157920

Auction Procurement Form

Tracking No. _____
Catalog No. _____

DONOR'S NAME _____

(As it should appear in the Auction Catalog – **PLEASE PRINT NAME**)

CONTACT NAME _____

(Person whom we may contact for additional information – **PLEASE PRINT NAME**)

DONOR'S ADDRESS _____

DONOR'S PHONE _____

DONOR'S EMAIL/WEBSITE _____

ITEM DONATED _____

Detailed donation description – include quantity, size, color, restrictions, number of people, limitations, etc. Auction Committee will use this description to create Auction Catalog copy unless otherwise instructed.

ITEM DESCRIPTION _____

EXPIRATION DATE _____

Valid from:

Valid to:

ESTIMATED FAIR MARKET VALUE \$ _____

This value is tax-deductible to the extent allowable by law. SCSNA is a 501 (c) 3 Non-Profit Organization. Tax Identification No. 91-2157920

SPECIAL INSTRUCTIONS

- | | |
|---|---|
| <input type="checkbox"/> Donor to provide Certificate | <input type="checkbox"/> Delivery by Donor On (date) _____ |
| <input type="checkbox"/> Certificate is attached | <input type="checkbox"/> Auction Committee please pick up On (date) _____ |
| <input type="checkbox"/> Auction Committee to provide Certificate | <input type="checkbox"/> Please send an Invitation to Donor |
| | <input type="checkbox"/> Please send me information on advertising in the Auction Catalog |

AS MY DONATION, I am enclosing a monetary gift of \$ _____

PROCURED BY _____

(Person responsible for securing donation – **PLEASE PRINT NAME**)

PROCURERS PHONE _____

SCSNA STUDENT'S CLASS _____

(Include Teachers Name and am/pm - if applicable)

Thank you for your support!