



2019 Auction Donation Form  
**A Night at The Races**

For the purpose of assisting with a fundraising auction for the Night at the Races, the Heights Hillcrest Regional Chamber of Commerce, undersigned donor hereby agrees to donate the item described herein to A Night at the Races:

**Please Print or Type:**

Donor/Company Name: \_\_\_\_\_  
 (As you wish it to be listed on the bid sheet)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Retail Value of Item or Service \$ \_\_\_\_\_ (Needed for IRS purposes)

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Please describe the donated item(s) in full detail:

  
  
  
  
  
  
  
  
  
  
  

List ALL RESTRICTIONS in detail: (i.e. time specifications, legal restrictions, exchange privileges)

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Certificate/item enclosed? \_\_\_ Yes \_\_\_ No      NATR to produce certificate? \_\_\_ Yes \_\_\_ No  
 (Please date gift certificates to reflect 6 months or 1 year from February 23, 2019)

This item can be combined with other items to create a basket. \_\_\_ Yes \_\_\_ No

Delivery will be made on? \_\_\_\_\_

Approval Name (please print): \_\_\_\_\_

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this completed form to:  
Lee Ann O'Brien, McGregor Foundation  
14900 Private Drive, Cleveland, OH 44112  
Phone (216) 268-8999

**THANK YOU FOR YOUR DONATION. WE APPRECIATE YOUR SUPPORT!**

For Office Use Only:

Date Form Received: \_\_\_\_\_ Date Item Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Date Entered into SEM: \_\_\_\_\_ Item No: \_\_\_\_\_ Package Number: \_\_\_\_\_