

2018 Auction Commitment Form Deadline: Wednesday, February 28, 2018

Donor Name:			
Value of In-Kind Dona	(As your	would like it to be recognized)	
Address:			
Phone:			
Contact Person's Nam	ne & Title:		
Description of Auction	Donation:		
Donor Checklist:			
Gift Certificate Encl	osed No Certificate Need	ded 🔲 Emailed l	ogo as applicable to <u>jennifer.felts@chsfl.org</u>
☐ Included Value	Included Contact P	Person Contact t	o schedule pick-up/delivery
Please fax or mail this of Children's Home Socie 711 NW 1 st Street, Gaine Fax – (352) 334-4345	ety of Florida; Attention: Jenny esville, FL 32601		iil – <u>jennifer.felts@chsfl.org</u>
For more information,	please contact:		
Jenny Felts Mike Hastings Michael Pittman Amanda Carreon	Special Events Coordinator Event Co-Chair Event Co-Chair Event Co-Chair	(352) 334-0955 (352) 538-1092 (352) 222-0379 (352) 318-0818	jennifer.felts@chsfl.org mike@mhastings.com Pittman2@yahoo.com amandad.carreon@gmail.com

Thank you for helping our community's most vulnerable children!

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For office use only	
Date received:	_Authorized Representative Signature:
□ Completed by donor	□ Completed by auction representative