



AUCTION COMMITMENT FORM

DONOR INFORMATION:

Company: _____

Contact Name: _____

(as you wish to appear in marketing materials)

Address: _____ City: _____ Zip: _____

Email: _____ Phone: _____

ITEM(S): *Description of item(s); color, size, artists, etc., as you wish to appear in program. Use back for extra room.*

**** IF YOUR ITEM REQUIRES A GIFT CERTIFICATE, PLEASE INCLUDE IT WITH THIS FORM ****

RETAIL VALUE: \$ _____ *(minimum \$50)*

Are there any conditions or restrictions on this donation (reservations, tax/gratuity, extra charges, etc.)? If so, please specify:

EXPIRATION DATE: *(If applicable; please allow a minimum of one year from April 1, 2024):* _____

DONATED ITEM(S):

Mail Form & Donation To:

Christian Community Action

Attn: Tiffani Davis

200 S. Mill Street

Lewisville, TX 75057

Email: Tiffani.Davis@ccahelps.org

Pickup Instructions:

Where: _____

When: _____

Contact: _____

Phone: _____

Email: _____

The following endorsement certifies that a copy of this form is an acknowledgment for the above-mentioned contribution.
Christian Community Action Tax ID: 23-7319371.

By: _____ Date: _____

Donor Signature