



Silent Auction Donation Form
American Osteopathic Academy of Orthopedics 75th Anniversary
Celebration Silent Auction

Friday, October 14, 2016 ♦ Washington Marriott Marquis ♦ Washington, DC

(Please type or print clearly and fill out **ALL** requested information.)

Contact Person _____

Donor/Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

I would like to donate to the **AOAO Foundation Silent Auction Fund**.

Enclosed is a check for \$ _____ made payable to **AOAO Foundation**.

I would like to donate _____ **an item** or _____ **a gift certificate** or _____ **both** to the Silent Auction:

Please complete this form with information exactly as you want it to appear in all publicity and on the bidding sheet.

Required

1. Item, certificate or letter, in “hard copy” form* (*if applicable*)
2. Photo/Logo , sent electronically

All travel prizes should be valid for one year from date of auction (expiration date of 10/14/2017 or later), with any blackout dates clearly noted.

Name of Donated Item (***Required!***): (i.e. Weekend Getaway) _____

Description (***Required!***) that will be used in all publicity: (Maximum 40 words) _____

Blackout dates/restrictions: _____ Valid until: _____

Estimated retail value of your donation (minimum of \$50) \$ _____

*I will (check which one): _____ include the item/certificate with this donation form.
_____ ship/mail the item to AOAO office to be received by

September 10, 2016 to 2209 Dickens Road, Richmond, Virginia 23230-2005.

_____ e-mail to crystal@aoao.org.

This form was completed by: _____

Name, Title

Phone