



The Black Rep
6662 Olive Blvd
St. Louis, MO 63130
314-534-3807

ITEM DONATION FORM

| | | |
|---|----------------------|----------------|
| COMPANY/DONOR NAME: | | |
| Address: | | |
| City | State | Zip |
| Telephone (H) | Telephone (W) | Ext. |
| Fax | E-mail | |
| Donor's signature: | | |
| Solicitor's signature: | | |
| DONATION/ITEM | | |
| 1. Description of donated item for auction catalog (please list any restriction/exclusions/specifications): | | |
| | | |
| | | |
| Donor's Estimate of Fair Market Value of Item \$ | | |
| If item must be picked up, indicate: | | |
| Date | Time | Contact |
| Location (if different from address listed above) | | |
| DONATION/ITEM | | |
| 2. Description of donated item for auction catalog (please list any restriction/exclusions/specifications): | | |
| | | |
| | | |
| Donor's Estimate of Fair Market Value of Item \$ | | |
| If item must be picked up, indicate: | | |
| Date | Time | Contact |
| Location (if different from address listed above) | | |

The Black Rep is a 501 (c) (3) tax exempt organization. Donations are tax deductible to the extent of the law. Acknowledgement of your donation for tax purposes will be sent upon receipt of this form and donation.

Please return this form and/or donations to:

The Black Rep
6662 Olive Blvd
St. Louis, MO 63130
314-534-3807

| | | |
|--------------------------|-------------------|------------------------------|
| TBR Contact _____ | Catalog No. _____ | Corporate / Individual _____ |
| Pickup _____ | Date Used _____ | Database _____ |
| Date Entered _____ | Event _____ | Ack Sent _____ |