



15<sup>th</sup> ANNUAL  
**HOPE GALA**  
CELEBRATING A BRIGHT FUTURE

RELATIONSHIP NAME:
RELATIONSHIP PHONE:
RELATIONSHIP EMAIL:

<b>1</b>	<b>Business/Donor (as you prefer to be listed in catalog)</b>			<b>VALUE OF DONATION:</b> (if priceless, please state fair market value) <b>\$</b> <b>Item accompanies form?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Gift certificate accompanies form?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>ACS has my permission to create gift certificate?</b> (please be sure to provide a detailed description and restrictions in Sections 2 and 3) <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Item will be delivered to ACS staff by:</b> <b>DATE:</b>
	<b>Contact Name</b>		<b>Title</b>	
	<b>Address</b>		<b>City, State Zip</b>	
	<b>Phone</b>		<b>Cell Phone</b>	
	<b>Email</b>			
	<b>Website</b> (as a link to item)			
	<b>ITEM TITLE</b> (donation name – one item per form, please)			
<b>CATALOG DESCRIPTION – Please provide a detailed description below</b> <b>You may attach a Word document as needed.</b> <i>Description may change for final version of online catalog</i>				
<b>3</b>	<b>RESTRICTIONS – Unless otherwise specified, all items expire September 16, 2024</b> (list as you would like printed in catalog and online)			
	<input type="checkbox"/> Expires:	<input type="checkbox"/> Mutually agreeable date/time	<input type="checkbox"/> Excludes Tax/Tip	
	<input type="checkbox"/> Date Specific: _____	<input type="checkbox"/> Excludes Holidays	<input type="checkbox"/> Other:	
<input type="checkbox"/> Blackout Dates (list):	<input type="checkbox"/> Excludes Weekends			
<b>4</b>	<b>DONOR SIGNATURE</b>		<b>DATE</b>	
			<b>For Office Use Only      Section? L / S</b>  <b>Item #</b>	

THANK YOU FOR YOUR GENEROUS GIFT!

Your donation is tax-deductible under IRS 501(c)(3) TAX ID #13-1788491

Tina Burns: Tina.Burns@cancer.org

Please Mail Donations To: American Cancer Society | 609 98th Dr NE Lake Stevens, WA 98258

