



2017 SILENT AUCTION CONTRIBUTION FORM

Thank you for your generous support!

Donation description: (Please include expiration dates, limitations, special terms, etc.)

-
1. Please provide the estimated value of this item: \$ _____
 2. Is the item included with this form? YES _____ NO _____
 3. Will the item be: _____ Delivered to AgeOptions _____ Available for Pick-up on Date: _____

Your Name or Business Name: (as you prefer it to appear in the Celebrating Innovations 2017 program book)
If available, please include a copy of your business card.

Name/Business Title to appear on the tax receipt: _____

Address _____

City, State, Zip _____

Email _____ Phone _____

Signature _____

Please fax completed form to Roberta Stroup at (708)524-0870, scan/email to Roberta.Stroup@ageoptions.org or mail to AgeOptions, 1048 Lake Street, Suite 300, Oak Park, IL 60301. For inquiries regarding pick up and/or delivery of donated items, or for additional information about sponsorships, advertisements or to purchase a table/individual tickets, please call (708)383-0258.

- I cannot contribute an item for the auction, but I would like to support **AgeOptions**. Please accept my tax-deductible gift of \$ _____. (Please make checks payable to AgeOptions and mail with a memo of "2017 Event" to our office at 1048 Lake Street, Suite 300, Oak Park, IL 60301.)

To be included in the program book, ALL DONATIONS must be received by AgeOptions no later than Friday, July 31, 2017.

For internal use:

Name of solicitor: _____

Date donation was received:
