



Auction Donation Form

Please print clearly, complete in detail and email/attach to your donation.

Solicited By: _____ (for internal use)

Donor/Company Name: _____

Donated Item(s): _____

Donor Stated Value: _____ Website: _____

Contact Person: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____
(This is the email address where your post-event auction receipt will be sent)

Complete Description of Item: _____

Restrictions, Expiration Dates, etc.: *(We appreciate validity of at least one year from event date)* _____

Please check one of the following: Physical Item Gift Certificate Enclosed
 Please Create Certificate*

*Contact info for certificate *(if different from above)*: _____

Please send this form and all donations to: **Tilly's Life Center**
Attn: Christina Morrissey
17 Pasteur
Irvine, CA 92618
(949) 648-0001 | christina@tillyslifecenter.org

Thank you for your donation benefiting Tilly's Life Center. Tax ID: 45-5468732.