



AFFA

ALLIANCE FOR FULL ACCEPTANCE

A Taste of Equality

November 14, 2009

Memminger Auditorium

This form can also be completed and submitted online at <http://www.affa-sc.org>

Donor Name (as it will appear in catalog)		CATALOG DEADLINE: October 31, 2009 Donations made after this deadline will be included in an addendum.	
Business Name (if applicable)		Item Name	
Mailing Address		Donor Stated Value (minimum value of \$50 requested) \$	
City	State	ZIP	Cash Donation <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Check Will Be Mailed
		Donation By Credit Card CC# _____ Exp. Date _____	
Business Phone	Home Phone	FAX	Contact Name
			Contact Phone
Donor Email Address		Donor Website	Signature Of Donor (required)
			Date

DESCRIBE DONATION IN DETAIL This description will be used to write the catalog copy. Please be complete (i.e. color, size, material, quantity, number of people, valid dates, etc.) Please attach any additional information to this form.

RESTRICTIONS (expiration date, date specific, tax and gratuity not included, etc.)

TANGIBLE ITEM

- Donated item will be delivered to AFFA office
- Please pick up my donation*

*Pick-up address (if different than above)

INTANGIBLE ITEM

- Donor gift certificate accompanies donation form
- Donor gift certificate will be delivered/mailed to AFFA
- AFFA has my permission to create gift certificate
- Donor to provide display item (maximum space of 2 ft. x 2 ft.)

Would you like to receive an auction catalog?

- YES
- NO

Name of Procurement Representative

Day Phone

PROCUREMENT NUMBER

DATA ENTRY BY

DONATION DATE

ID NUMBER

CATALOG NUMBER

FOR OFFICE USE ONLY

Alliance For Full Acceptance • PO Box 22088, Charleston, SC 29413

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