



DONATION CERTIFICATE

DONOR NAME _____
(as you wish name to appear on printed materials)

COMPANY NAME _____

PERSON TO BE ACKNOWLEDGED _____

ADDRESS _____

PHONE _____ FAX _____ EMAIL _____

CONTACT NAME _____

AUCTION ITEM (Please give a brief description of the item)

RETAIL VALUE \$ _____

SPECIAL INSTRUCTIONS:

- GIFT CERTIFICATE ENCLOSED
- CERTIFICATE EXPIRATION DATE _____
- DONATION TO BE DELIVERED TO HUCKLEBERRY ON _____
- DONATION NEEDS TO BE PICKED UP ON _____
- OTHER _____

SIGNATURE OF DONOR _____

SOLICITOR'S NAME _____

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

THANK YOU FOR YOUR DONATION!!

Huckleberry Youth Programs' mission is to educate, inspire, and support underserved youth to develop healthy life choices, to maximize their potential, and to realize their dreams. Our tax ID # is 94-1687559.

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