



**Quad County
Urban League**

*Empowering Communities.
Changing Lives.*

ANNUAL EQUALITY GALA **RAFFLE/AUCTION DONATION FORM**

CONTACT INFORMATION (Please print or type)

Company Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ - _____

Phone: _____ Fax: _____

E-mail: _____ Web site: _____

DONATED ITEM (Please Print or Type)

Name of Item Donated: _____

Manufacturer: _____ Model #: _____ Cost/Value: _____

• Complete Description of Item:

*If item contains multiple services or products please detail in description.

SERVICE OR GIFT CERTIFICATE INFORMATION REQUIREMENTS

If donating a gift certificate, please include the following information on the certificate or in a letter.

- Name of product or service
- List of gift inclusions and exclusions
- Name, address and full contact information of company
- Name of contact person for further information
- Instructions on how to redeem gift
- Include any additional information such as a photo or brochure, as appropriate
- Expiration date of certificate

DELIVERY OPTIONS

The Raffle/Auction gift listed above will be **picked up** by Quad County Urban League's Staff **by October 17, 2018**. Pick up Location is _____.

The Raffle/Auction gift listed above will be **shipped** to Quad County Urban League's Main Office located at 1685 N. Farnsworth Ave. in Aurora, Illinois 60505 to arrive by: **October 17, 2018**.

Please Mail or Fax completed Form to: Gala Committee (630) 851-2703 by October 1, 2018