



THE LUCY PROJECT

Auction Item Donation Request Form



Organization/Event Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Preferred Contact Method: Phone Email

Item Information:

1. Item Name: _____

2. Item Description: _____

3. Estimated Value: _____

4. Expiration Date (if applicable): _____

5. Restrictions or Limitations (if any): _____

Donor Information:

1. Donor Name: _____



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2. Donor Address: _____
3. Donor Phone Number: _____
4. Donor Email Address: _____
5. Donor Website (if applicable): _____

Additional Information:

1. Would you like recognition for your donation? Yes No
2. If yes, please return form with high-res logo.
3. Do you require a donation receipt for tax purposes? Yes No
4. Additional Comments or Instructions: _____

Thank you for considering donating an item to our auction! Your generosity will make a significant impact on our cause.

For more information, please contact:

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305.726.5467

Sandra@lucyproject.org

<https://www.lucyproject.org/onceuponatime>