



**Special Children's League
South Bay Committee
Auction Donation Form**

For Committee Use Only	
Donation Item # _____	
Status: Attached Pending (circle one)	
Acknowledgement?: Yes No (circle one)	

Donation Item: _____

Donation Description: (Please describe in detail, including any special features or limitations):

Restrictions/Blackout dates: _____

Estimated Value (Market Value): _____ **Expiration date:** _____

Item Type: Tangible _____ Gift Card/Certificate _____ *Service/Other _____

*For service/Other items, will donor provide certificate? Yes _____ No, SCL to provide _____

Donated by: (Please enter company and or/individual name(s) as it should be listed in benefit program):

Who should acknowledgement be sent to? (Please fill in completely)

Mr. Mrs. Ms. Dr. Other _____ **Name:** _____

Address: _____

Phone: _____ **Email:** _____

Any additional information? _____

Please contact Barb Dancy at (310) 541-4665 or scl.sobay@gmail.com with questions

Donations of cash, goods, or services are tax deductible. No goods or services were provided in return for this donation.

Thank you for your support!

Special Children's League South Bay committee P.O. Box 2526 Palos Verdes, CA 90274
Tax ID# 95-6047964

SCL Member: _____

Date: _____

White copy: Database

Yellow copy: Donations

Pink copy: Contributor