

Rowan Branch – Children’s Hospital Oakland Auction Donor Form www.rowanbranch.org

Donor Name (as it should appear in auction publicity and brochure):

Address:

email:

Website:

Contact Person:

Phone:

Donation Status:

- Certificate is attached
- Please create a certificate for my item
- Item accompanies form
- Please call me to arrange for donation pick-up

Donor’s Signature _____

Please enclose brochures, flyers, photographs, logos, menus, business card or other promotional materials that would help us promote your business and your donation. Thank you!

Description of Item or Service (include any restrictions):

Donor Estimate of Value:

Expiration Date:

11/7/2010 (update if needed)

**PLEASE MAIL FORM OR FAX TO:
Rowan Branch – Children’s Hospital Oakland
c/o 10 Smith Ranch Road, San Rafael, CA 94903
Fax: (415) 472-7767**

Thank you for your support of Children’s Hospital and Research Center Oakland. Children’s Hospital Branches, Inc. is a 501 (c) (3) non-profit charitable organization with Tax ID # 94-2227650. Donations are fully tax deductible to the extent allowed by law.

Questions? Please call the Auction Committee:
Mary McAfee (415) 472-7757 or Janice Alamillo (925) 287-1444