



16th Annual TnT, June 19, 2010

AUCTION DONATION Information

Please complete the following so that we can accurately record and acknowledge your information in our records.

DONOR CONTACT INFORMATION:

Individual Business Date: _____

Name: _____

Business/Company Name: _____

Address: _____

City/State/Zip: _____

Phone (W): _____ Phone (H): _____

Phone (Cell): _____ Phone (Fax): _____

Email/Website: _____

DONATED ITEM INFORMATION:

Item Donated: _____ Retail value: \$ _____

Please provide a description of your item that makes it enticing to auction participants.

Item Description: _____

When will item be delivered to Teller? now date _____

Please deliver items by May 22nd—unless other arrangements have been made! Thank you!

- If physical item is not present (ie: gift certificates, trips, vouchers), please provide either a:
 - certificate** **display**
- Donor name as it should appear in the program: _____
Your name or business will be recognized in our TnT program unless you request it not to be.
- **Expiration Date or specific dates** for scheduling if applies: _____

Donor Signature: _____ Date: _____

TnT Representative: _____ Date: _____

For Teller Use only:	Category: _____
	Date Entered: _____ by: _____
Silent _____ Live _____ Raffle _____	Item Location: _____

The Teller • P.O. Box 548 • Corvallis, MT 59828 • 406.961.3507 • Fax: 406.961.4489 • lauren@tellerwildlife.org

PHYSICAL ADDRESS for **NON-USPS** SHIPPED items only: 1288 Eastside Hwy, Corvallis, MT 59828