



**Special Event
Auction Donation**

**San Diego Family Justice Center Foundation
707 Broadway, Suite 700
San Diego, CA 92101**

Event:

Event Date:

Donation Description: _____

This description will be used for promotional purposes and in the event program. Please include pertinent information, such as time and limits, expiration dates, blackout date periods, or other restrictions. Also, if possible, enclose several copies of any brochures that describe your gift.

Expiration Date: _____

Estimated Value: _____

Delivery Date: _____
(or pick up Date)

Certificate Enclosed: _____

Donor: _____
(Print Name as to be used in program)

Authorized Signature: _____

Contact Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____

Fax: _____

Email: _____

Additional Notes: