



WINE AUCTION – DONOR FORM

916 Navarre Ave., New Orleans, LA 70124 / (504) 483-8487 / Fax (504) 483-8491

Donor No. _____

Is Donor Anonymous: Yes No

Item Number

A. TO BE COMPLETED BY DONOR (please fill out ALL applicable information completely!)

1. Donor _____ Contact Person _____

Street / PO Box Address _____

City _____ State _____ Zip Code _____

Email: _____

Phone _____ Fax _____

DONOR SIGNATURE: _____ Date _____

GO-GETTER SIGNATURE: _____ Date _____

2. I AM DONATING THE FOLLOWING:

Merchandise Gift Certificate Service Donation Cash Underwriting

Item Donated _____ Quantity _____

Vintage _____ Variety _____ Vineyard _____

Bottle Size _____

TOTAL DONATION VALUE \$ _____ .00

3. HELP US SELL YOUR ITEM! Please DESCRIBE, but be CONCISE & ACCURATE – For several items, give individual item values.

LIST ALL RESTRICTIONS / LIMITATIONS _____

IS ITEM EXCHANGEABLE: YES NO G.C. EXPIRATION DATE _____

4. VISUAL / SAMPLE PROVIDED: YES NO

B. TO BE COMPLETED BY PROCESSING

1. ITEM MEDIA 1. Merch 2. G.C. 3. GC/Visual 4. GC/Sample 5. GC/Merch

2. ITEM CAT. _____ COMM. CODE _____ DONOR VALUE \$ _____ .00

Received by: _____ Date _____

ITEM NUMBER