



SILENT AUCTION DONOR FORM

DONOR OR BUSINESS NAME exactly as you would like it to appear (PLEASE PRINT ONLY):

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON (PLEASE PRINT) _____

PHONE (best number to reach you): _____

EMAIL: _____

ITEM NAME: _____

COMPLETE DESCRIPTION _____

VALUE \$: _____

RESTRICTIONS / LIMITATIONS: _____

We are a 501(c)(3) non-profit corporation.
We will send you an acknowledgement of your donation for tax purposes.
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