Date Recvd	
TY Ltr	

2024 Festival of Trees Item Donation Information

Items to be used for Raffles or the Silent Auction

Donor Name:			
Mailing Address:			
Telephone:	F	ax:	
	Estimated Value of Donation:		
Description of Your D	onation (Please include any limitations o	or restrictions):	
	you want to make the gift certificate to provide this for you?	Do you want us to pick up your donation or will deliver it to Hospice?	you
•	de the gift certificate	☐ No, I'll deliver it to the Hospice	
☐ No, I'll provide	e the gift certificate	\square Yes, call and we'll set a time to pick it up	
		Date:	
things in a large bask	our item(s) together with other et for raffle or may offer as a will be responsible for pricing	Do you have any props/brochures/business card for display with your item? If so, please include with your donation at pickup or delivery.	ls

Thank you for your generous donation!

