



34<sup>th</sup> Annual  
*Crusaders' Ball Against Cancer*  
*Donation Form*

DATE \_\_\_\_\_

DONOR \_\_\_\_\_  
(Individual or Corporate Name)

ADDRESS \_\_\_\_\_  
(Street) (City, State, Zip)

CONTACT PERSON \_\_\_\_\_  
(Please provide both a DAYTIME PHONE NUMBER and EMAIL ADDRESS)

ITEM DONATED \_\_\_\_\_  
(Detailed description of the item donated, including size, color, medium, artist, expiration dates, and other restrictions or instructions pertaining to the item.)

Suggested Retail Value: \$ \_\_\_\_\_ Expiration Date: \_\_\_\_\_

If you are donating a gift certificate or letter of intent, please enclose it with this form.

Person to contact for delivery \_\_\_\_\_ Phone number \_\_\_\_\_

Donor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Solicited By \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your gift!\**

\*Your contribution is tax deductible to the extent allowed by law. There may be special rulings concerning the extent of deduction of inventoried items. Your accountant can provide specific information.

Return this form to:  
American Cancer Society, 6500 Sugarloaf Parkway, Suite 260, Duluth, GA 30097  
(770)814-0123, Fax (770)814-9517