CANCER SUPPORT NOW

Cancer Survivors Offering Support

ope and Healing Honors September 24, 2016

Silent Auction Donation Form

If you are donating more than one item please copy this form and use one form per item. **Donor Information**

Donor/Company Name	
Contact Name Website	
Address	
City State Zi	ip
Phone/sEmail Auction Item	
Auction Item	
Estimated Value Expiration Date (if a	pplicable)
~ If donation is in the form of a Gift Certificate please enclose it with this form ~ <u>Additional Item Information (if required)</u> Please be as complete as possible - note restrictions, blackout periods or other helpful information.	
I do not have an item to donate but wish to make a tax-deductible contribution of \$ Please make check payable to <i>Cancer Support Now</i> . You will receive a letter acknowledging your donation. Credit Card # Exp. DateName on Card CVC	
Cancer Support Now - www.CancerSupportNow.org Cancer Survivors Offering Support P.O. Box 37338 ~ Albuquerque, NM 87176 info@cancersupportnow.org ~ 505.255.0405	For Office Use Only Item# Solicited by:

Cancer Support Now is a 501(c)(3) not-for-profit organization registered through the State of New Mexico. It is recommended that you keep a copy of this form as proof of your generous donation. Please consult with your tax advisor for specific information.



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Goods/Services
Provided by
Expiration Date/Restrictions
Donor Signature and Date
Cancer Support Now ~ PO Box 37338 ~ Albuquerque, NM 87176 505.307.3414 ~ www.cancersupportnow.org ~ info@cancersupportnow.org Cancer Support Now is a New Mexico nonprofit corporation, a section 501(c) (3) organization under the Internal Revenue Code, EIN #80-0515169. All contributions to the Foundation are deductible for federal income tax purposes, as provided by law. In accordance with IRS regulations, this letter verifies that no goods or services were provided in whole or part for your contribution. Please retain this letter for your tax records or provide it to your tax preparer.
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HOPE & HEALING SPONSORSHIP COMMITMENT FORM

Company/Donor Name
(As it should appear on printed materials)
Contact Name
Address
City, State, Zip
TelephoneEmail
Please select a sponsorship level:
Gold Sponsor (\$2000)
Silver Sponsor (\$1000)
Bronze Sponsor (\$575)
I cannot attend the Hope and Healing event this year, but would like to donate
Payment Information:
Enclosed is the amount of \$ made payable to CSN
Please charge \$ to myVisa Mastercard
Card NoExp. Date3 Digit Code on Back

Complete form and enclose payment. Return form to:

Cancer Support Now, Inc. P.O. Box 37338 Albuquerque, NM 87176 Attn: Kathi Ledford