



Donation Form

Celebration of Surgical Success

6:30-10:00pm | Friday, October 23, 2015

Gaylord Opryland Resort & Convention Center

In conjunction with the ACVS Surgery Summit

1. What will you/your organization contribute this year? Please submit one form per item donated. (select one)

☐ Item(s) Donation ☐ Course Donation ☐ Cash Donation (www.acvs.org/foundation/donate)

The following item or course will be donated to the ACVS Foundation for use at the Celebration of Surgical Success. IMPORTANT: The following information may be included in publications.

Item/Course Name: _____

Item/Course Description: *(Provide 3-5 sentences describing the item. Note size, restrictions, expirations or unique features.):*

The retail value* of the item is \$ _____

*"Priceless" is not an option.

Suggested minimum/starting bid** \$ _____

**We reserve the right to change the starting bid at our discretion.

PLEASE DO NOT SHIP LARGE ITEMS TO THE ACVS FOUNDATION OFFICE. STORAGE SPACE IS NOT AVAILABLE. Shipping instructions will be provided. Smaller items can be shipped to the ACVS Foundation office (address below) to arrive before September 10, 2015

2. Please indicate the name that should appear on the donation acknowledgement correspondence that will be suitable for potential tax deduction purposes.

3. For publication materials, please indicate who/what organization should be acknowledged as the donor.

(Please clearly print the exact name of person(s) including titles, etc., or organization.)

Anonymous donation donor information will not be included in the publications.

4. If available and appropriate, please email a digital photo or certificate of your contribution to slitten@acvs.org.

The best quality photo to submit is a TIFF (file extension.tif) of 300 DPI or greater. A JPEG (.jpg) file of 300 DPI or greater is also acceptable.

5. Please provide us with the following information below. We will use this information to contact you if we have questions about the donation.

Your Name: _____

Phone: _____

Business Name, if applicable: _____

Fax: _____

Email: _____

Address: _____

City/State/Zip: _____

To the extent provided by law, donations to the ACVS Foundation are deductible as charitable contributions for Federal Income Tax purposes. Contact your accountant for additional restrictions and guidelines.

ACVS Foundation

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