



**Maplewood Chamber of Commerce
27th Annual Dinner Auction
Donation Tracking Form**

DONOR NAME: _____

DONOR BUSINESS: _____

ADDRESS (city, state, zip): _____

PHONE: _____

EMAIL: _____

PLEASE CHECK HOW DONOR SHOULD BE RECOGNIZED IN EVENT MATERIALS (choose only one please):

☐ Donor Name (see above) ☐ Donor Business (see above) ☐ Anonymous ☐ Other _____

DONATION TYPE

☐ **ITEM**

Description: _____

Value: \$ _____

- ☐ The item will be received by the Chamber office along with this form.
☐ The item will be delivered to the Chamber Office on this date: _____
☐ The item needs to be picked up by the Chamber on this date: _____

☐ **CERTIFICATE**

Description: _____

Value: \$ _____

- ☐ The certificate will be received by the Chamber office along with this form.
☐ The certificate will be delivered to the Chamber on this date: _____
☐ The certificate can be picked up by the Chamber on this date : _____
☐ This form will serve as the certificate.

☐ **MONETARY DONATION** \$ _____ ☐ Cash/Check Enclosed ☐ Credit Card

MasterCard/Visa #: _____ Exp. Date: _____

AUTHORIZATION SIGNATURE: X _____

Maplewood Chamber of Commerce dues, gifts and contributions may be tax deductible as ordinary and necessary business expenses: they are not deductible as charitable contributions for Federal Income Tax purposes. Consult with your tax advisor as to deductibility.

Completed forms may be returned via mail, fax or email to:

2915 Sutton Blvd, Maplewood, MO 63143

Fax: 314.781.5397 **Phone:** 314.781.8588 **Email:** info@maplewood-chamber.com

=====

FOR OFFICE USE ONLY:

Item # _____

Date Acknowledged _____

Item/Certificate Rec'd: Yes No

Solicited by: _____