

Pink Palace Casino
 Saturday, March 14, 2020
 Benefiting

The Breast Cancer Research Foundation of Alabama

Donor Name	Indicate donated item to be listed as "Auction" or "Prize"
Company Name	Contact Name & Phone for Arrangements
Address	Name of Individual for Thank you letter <i>(If different than Donor Name)</i>
City, State, Zip Code	Donor Stated Retail Value:
Email	Phone Number
Restrictions: Please state any limitations or special restrictions.	
Detailed Description as you would like used on signage. Please be precise (i.e. color, quantity, size, number of people, etc.)	<input type="checkbox"/> THIS IS AN INTANGIBLE ITEM: (DONOR: Please include any appropriate display materials)

THIS IS A TANGIBLE ITEM WHICH CAN BE DISPLAYED

A Certificate accompanies this donor form

Item accompanies donor form

I will provide a Certificate by February 14, 2020

Please pick up my donation on, _____

BCRFA has my permission to create a certificate

THIS IS A CASH DONATION Check enclosed for \$_____

Donor may claim a charitable contribution for federal income tax purposes to the good faith estimated fair market value of the goods/services provided less the amount of any cash received from the Breast Cancer Research Foundation of Alabama.

Signature of Donor: _____

Signature of Committee Chairperson _____

Contact Information for Chairperson _____

BCRF of Alabama is a 501c(3) organization. Our tax ID # is 63-1162650

(205) 996-5463

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www.BCRFA.org

www.pinkpalacecasinonight.com

