

American Association of Physician Specialists Foundation

Second Annual Silent Auction

June 24, 2016

Auction Donation Form

STEP 1: DONOR INFORMATION

(Individual/Business, List as you would like it to appear in acknowledgements.)

Mr./Mrs.

(Contact Name)

(Street Address, City, State, Zip)

(Phone)

(Email)

STEP 2: DESCRIPTION OF DONATION

Please use only one Auction Donation Form per Item.

Item Name: _____

Value: _____

(Per IRS Guidelines, it is the donor's responsibility to determine the fair market value of donated items.)

Description: _____

Monetary Donation: \$ _____ Monetary donation may be made in lieu of donating an auction item. Please make check payable to the AAPS Foundation. [Click here](#) to make an online donation or visit www.aapsfoundation.org and click on the Donate Today button!

STEP 3: DELIVERY ARRANGEMENTS

- I will deliver the item to the AAPS Registration Staff at the Annual Meeting.
- I will deliver to the AAPS Foundation office by: _____.
- My auction item/check is enclosed with this form.

Return form and donation by May 2, 2016 to:

AAPS Foundation
5550 W. Executive Drive, Suite 400
Tampa, FL 33569
or Fax to: 813.433.2277
or Email form to: dwurmlinger@aapsfoundation.org
Phone: 813.433.2277 Ext. 17

- The AAPS Foundation is a 501 (c) (3) nonprofit corporation. Tax ID: 26-3554001
- A COPY OF THE OFFICIAL REGISTRATION (CH46196) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES ON THEIR WEBSITE (WWW.88.HELPFLA.COM) OR BY CALLING TOLL-FREE 1-800-435-7352 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Office Use

Date Form Received _____ Date Item Received TY _____ Pkg/Item # _____

Category _____ Initials _____