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.88HELPFLA.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 ___________