



## Love INC PLANT THE SEED AUCTION ITEM DONATION FORM

Monday, April 27, 2020 - MSU SUB Ballrooms

<b>NAME of CONTACT PERSON</b> who gathered the auction Item(s).
PHONE NUMBER
EMAIL
Church or Business Affiliation

**Themed Basket**

**Name of Basket:** \_\_\_\_\_

**NOTE:** Love INC reserves the right to separate any item(s) received in order to display them individually or with other donated item(s).

**If you DO NOT want your items separated or combined with other items, please check this box.**

**IMPORTANT TAX RECEIPT INFORMATION REQUIRED:** If a tax receipt should be given to the donor of an auction item, please indicate below whether the receipt should be given to the "Contact Person" listed above or to another "Donor". If it should be sent to another "Donor", please complete the information on the back of this form for as many "Donor's" as are needed.

**IF NO TAX RECEIPT NEEDS TO BE SENT, PLEASE CHECK THIS BOX.**

ITEM (please list description of each auction item separately):	CONTACT PERSON	DONOR	VALUE per Item:
1 _____	_____	_____	\$ _____
2 _____	_____	_____	\$ _____
3 _____	_____	_____	\$ _____
4 _____	_____	_____	\$ _____
5 _____	_____	_____	\$ _____
6 _____	_____	_____	\$ _____
7 _____	_____	_____	\$ _____
8 _____	_____	_____	\$ _____
9 _____	_____	_____	\$ _____

**TOTAL VALUE OF ALL AUCTION ITEMS:**

**PLEASE BRING THIS FORM & AUCTION ITEM(S) to LOVE INC BY: MONDAY, APRIL 13th, 2020!**

**Mail to:**  
Gallatin Valley Love INC  
PO Box 7117  
Bozeman, MT 59771

**Drop Off:**  
Gallatin Valley Love INC  
141 Discovery Drive  
Bozeman, MT 59718

**Questions? Contact:**  
Love INC Office at 406-587-6395  
or email: [communications@loveincgc.org](mailto:communications@loveincgc.org)  
**THANK YOU FOR YOUR DONATIONS & SUPPORT!**

**DIRECTIONS:** South on S. 19th, West on Stucky Rd, South on Discovery Drive. Office is on the right.

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 1:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 2:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 3:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 4:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 5:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 6:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 7:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 8:

**DONOR NAME**

Address

City/State/Zip

Donated ITEM # 9:

If there are more, please include additional names and addresses on another sheet of paper. Thank you!