



# 29th Annual Roundup for Autism Ranch Sorting Auction Contribution

September 15-17, 2017

ITEM # \_\_\_\_\_

Please **PRINT** or **TYPE** all information.

Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Donor (as it should be listed in the program)

\_\_\_\_\_  
Contact Person for Donation

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number (area code first)

\_\_\_\_\_  
Contributor's Signature

\_\_\_\_\_  
Contributor 's E-Mail

Description of Item:

Restrictions, if any:

Value (\$):

Does Item need pick-up services? \_\_\_\_\_ yes \_\_\_\_\_ no

Name of Solicitor: \_\_\_\_\_ Phone #: \_\_\_\_\_

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contact: Michelle Weatherspoon (x106) or michelle@roundupforautism.org  
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Please make a copy for your records

[www.roundupforautism.org](http://www.roundupforautism.org)