

Chabad of Tribeca: Auction Donation Form

Solicitor's Name:	
Donor/Company:	
Contact Person(s):	
Address:	
City/State/Zip:	
Email:	
Phone Number:	
•	describe the item to be donated and include a picture, or email 19@chabadoftribeca.com.
Estimated Value of D	Oonation:
Expiration Date (if ap	oplicable):
Special Instructions for	or Redemption (i.e. blackout dates):
	essary for service items: Certificate will be emailed Certificate abad of Tribeca should create a certificate
Delivery: □ I will deli	ver to Chabad of Tribeca 🔲 I will mail to Chabad of Tribeca
Donor Signature:	
Signature Date:	
*Chabad of Tribeca greatly appreciates your donation and has the right to use this	

item(s) at future fundraising events