

# AUCTION COMMITMENT FORM

Inaugural St. Jude Night of Promises

November 5, 2015

**\*Donor Information MUST be provided to receive donation receipt.**

Donated courtesy of: \_\_\_\_\_  
(Name as it should appear in Auction Guide)

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Description of item (for use in auction guide): \_\_\_\_\_

\* Description should be approximately 40 words or less in length. Due to space constraints within the auction guide, edits may be made to your text. \*\* Please send any applicable marketing materials with your certificate or item.

Special conditions or restrictions (including expiration date): \_\_\_\_\_

Fair Market Value (required for IRS purposes): \$ \_\_\_\_\_

**Thank you for your donation to the St. Jude Event. The ongoing childhood cancer research done at St. Jude is benefiting thousands of children in the DC Metro area, across the United States, and around the world.** ALSAC/St. Jude reserves the right to limit the display of items and reject any sponsorship or items offered for use therein. Sponsors agree that the party committee, their officers, members and employees shall be under no liability to the Sponsor by reason of any error or omission in the display of any item. All items tendered by Sponsors are accepted on the representation of the Sponsors and the Sponsor has authorized that the items tendered are given to the winner. In consideration of acceptance of such items, the Sponsor agrees to indemnify and save harmless committee members, their officers, members and employees from and against loss or expense resulting from claims or suits based upon the subject matter of such displays or items, including, without limitations, claims or suits alleging that such displays or items are not as represented to patrons participating.

**Items must be in-hand no later than October 31<sup>st</sup> 2015.**

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Auction Representative: \_\_\_\_\_ Phone: \_\_\_\_\_

☐ Item/GC in hand

☐ Donor will deliver by \_\_\_\_\_

☐ Item/GC to be collected

☐ GC to be prepared by committee

**Send completed form to:**

**Daniela Romero**

**Email: [daniela.romero@stjude.org](mailto:daniela.romero@stjude.org)**

St. Jude Children's Research Hospital is a qualified non-profit organization as defined under the Internal Revenue Code 501(c)(3) and listed in the Federal Internal Revenue Service Publication #78, "Cumulative List of Organizations". Our IRS tax identification number is 35-1044585. Representatives of St. Jude do not provide opinions or estimates of the value of the donor's prize and St. Jude will rely on the donor's valuation for all purposes. This is the official confirmation of the receipt of the prize by St. Jude from the donor. Thank you.

