



FOR OFFICE USE - CONTROL # _____

**BENEFIT AUCTION
ACQUISITION CONTRACT**

BENEFIT ACQUISITION CONTRACT | THANK YOU FOR YOUR GENEROUS SUPPORT!

DATE _____

DONOR NAME _____
(Print name exactly as it should appear in the magazine)

CONTACT PERSON _____

ADDRESS _____

CITY | STATE | ZIP _____

TEL | FAX | EMAIL _____

• PLEASE PROVIDE THE FOLLOWING INFORMATION:

ESTIMATED FAIR MARKET VALUE *(Gifts to the Benefit Auction are tax-deductible to the extent provided by law.)* \$ _____

IMPORTANT DETAILS | DESCRIPTION

• PLEASE NOTE: Members of the benefit team are responsible for auction placement and opening bid amounts.

SPECIFY DELIVERY OF ITEM *(For vouchers or gift certificates: please include donor's letter or certificate to guarantee redemption of this gift.)*

RESTRICTIONS *(Such as limitations, maximum amounts, costs not covered, # of guests, blackout dates, etc.)*

Donation acknowledgment letters will be mailed in January and June.

White and Yellow copy: Benefit Office

Pink copy: Logging

Gold copy: Donor

ACADEMY OF THE SACRED HEART

1250 KENSINGTON ROAD | BLOOMFIELD HILLS | MI 48304-3029 | T 248.646.8900 F 248.646.4143 | WWW.ASHMI.ORG

INQUIRIES MAY BE DIRECTED TO: BENEFIT LIAISON, ACADEMY OF THE SACRED HEART T 248.646.8900 EXT. 174