

2017 AUCTION DONATION FORM

CONTRIBUTOR INFORMATION Please print all names legibly and exactly as the	ey should appear in all event publications	DATE	
NAME OF CONTACT PERSON		TITLE	
CONTACT PHONE ()	EMAIL		
ADDRESS/CITY/STATE/ZIP			
JNDERWRITER'S NAME AS IT SHOULD B	E LISTED IN ALL PRINTED MATERIALS (if di	fferent from above)	
] I <u>DO</u> wish to be listed in the Ball auction catalog/ a	applicable publication [] I <u>DO NOT</u> wish to be listed in the	e Ball auction catalog/applicable publications	
DESCRIPTION OF ITEM(S) Please print legibly and exactly as it should app	pear in all event publications		
		<u> </u>	
		\$	
		\$	
Please contact me about picking up item(s)	[] I will mail or bring item(s) to the ACS office be	etween 8am-12pm and 1pm-4:30pm.	
CONTRIBUTOR SIGNATU	RE CATTI	CATTLE BARON'S BALL COMMITTEE MEMBER	
	3402 North 1st Street, Ste. 102 At 1788491 Please retain a copy of this do		
	Committe	o Contacti	
American	Committee	Committee Contact:	

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