



April 22nd-28th, 2019

www.WNINSpringAuction.org

DONATION PARTNERSHIP FORM

Please mail, email, or fax this form to

Natalie Wade, Director of Events/Theater

WNIN, Two Main St., Evansville, IN 47708

nwade@wnin.org

Fax: 812-428-7548 Phone: 812-423-2973

Deadline: April 10, 2019

DONOR INFORMATION

Business _____ Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ Website _____

DONATION

Please note: The purchaser must not be required to pay anything in order to redeem certificate, i.e., "Buy One, Get One Free" or price reduction certificates not accepted. All donations are subject to acceptance by the Auction Committee.

Items Donated: _____

Value \$ _____ X Quantity _____ = Total Value _____

Detailed Description (this is your on-air promotion, include any restrictions):

Gift Card/Certificate (check one)

Donor will provide Gift Card/Certificate by mailing in.

(NOTE: Please make expiration date one year from time of auction {example: 5/1/19} when possible)

WNIN is authorized to produce Gift Certificate

Merchandise (Expiration Date: _____)

Delivery Method For Merchandise

PICK UP DROP OFF MAIL

Image and Logo Requirements:

- Jpeg format-file size not to exceed 2 megabytes
- Ideal size: 600-800 pixels in height/width
- No smaller than 200 pixels
- We can also use images from websites!

Donors Signature _____ Date _____

(includes permission for logo and image use)

WNIN Representative _____

(All donated merchandise must be new and undamaged. Art antiques, and collectibles should be in marketable condition. WNIN reserves the right to authenticate the value of donations and to approve all scripts for on-air presentation. It is understood that all donations become the property of WNIN and the sale of those items is at the discretion of WNIN. Receipt will be supplied by the Auction office at the end of May 2018. WNIN produced certificates expire one year after purchase unless stated otherwise.)

Office Use Only

Logged by _____ Date _____

Item # _____ Lot # _____ Script # _____

Warehouse Location: _____

Delivery of Merchandise: Mail Drop-off Pick up Scheduled Pick-up Date & Time _____