



Auction Confirmation Form

Please return this form no later than Friday, September 17, 2010
via mail, facsimile or email to:

Nevada Cancer Institute

Office of Development/Special Events
One Breakthrough Way, Las Vegas, NV 89135
Telephone: (702) 821-0019 Fax: (702) 821-0066
rsvp@nvcancer.org

Thursday, November 11, 2010
ARIA Resort & Casino at CityCenter
Las Vegas, Nevada

Name of donor _____

Company (if relevant) _____

Tax identification number _____

Contact name and title (if different from above) _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Email _____ Company website _____

Donation Information and Donor Recognition

Please feel free to be creative with your description.
If available, please provide a high resolution 300 DPI image (jpeg, pdf, tif) of the donated item.

Name of auction item _____

Description of auction item _____

Please specify how your organization should be recognized _____ Estimated market value \$ _____

Delivery

Please check one Donation enclosed Item to be picked up Item to be delivered Create a certificate

Signature of Donor _____ Date _____

Special Conditions/Restrictions

Unless otherwise noted, this contract is valid for one year after auction date.

Expiration date ___/___/___

Please consult your tax advisor regarding the amount deductible as a charitable contribution for federal income tax purposes. Nevada Cancer Institute (NVCi) is also required by law to submit IRS form 8282 after the sale of donated items.

We regret that we are unable to donate an item, but would like to make
a contribution of \$_____ to Nevada Cancer Institute.

Thank you for your support!