

# TIDEWATER WINDS

PO Box 62000  
Virginia Beach, VA 23466  
Office: (757) 480-0953  
[www.tidewaterwinds.org](http://www.tidewaterwinds.org)

## Annual Auction Acquisition Form

Please return this form to:

Tidewater Winds  
Attn: TW Auction  
PO Box 62000  
Virginia Beach, VA 23466

Questions? Please call:

(757) 480-0953

*We gratefully acknowledge receipt of your generous contribution to our auction. Proceeds from the auction go to support our Free Summer Concert Series and our Education Program. Since Tidewater Winds is a non-profit organization, your donation may be deductible for Federal and State income tax purposes.*

Please keep a copy of this form as your tax receipt. Thank you for your support!

Please complete this form carefully and completely to ensure accuracy in the Auction Catalog.

This donation is ☐ Personal ☐ Company

Business or Family Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ email \_\_\_\_\_

Description of donation (please include listing of all items and/or special instructions):

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Any restrictions and/or expiration dates: \_\_\_\_\_

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Gift Certificate attached: ☐ YES ☐ NO To be printed by SMS - ☐ YES ☐ NO Value \$ \_\_\_\_\_

(Circle One) Appraised Valued Estimate Pick Up Date \_\_\_\_\_ Item Picked Up ☐ YES ☐ NO

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

### FOR OFFICE USE ONLY

Category (please check box)

- |                                                         |                                          |
|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> 100 Entertainment/Collectibles | <input type="checkbox"/> 600 Children    |
| <input type="checkbox"/> 200 Food Gift Card             | <input type="checkbox"/> 700 Personal    |
| <input type="checkbox"/> 300 Holiday Shopping           | <input type="checkbox"/> 800 OTHER       |
| <input type="checkbox"/> 400 Services                   | <input type="checkbox"/> 900 Art         |
| <input type="checkbox"/> 500 For the Home               | <input type="checkbox"/> GS Grand Silent |

Board or Committee Member \_\_\_\_\_

Item No. \_\_\_\_\_

Date Received \_\_\_\_\_

Data Entry Date \_\_\_\_\_

Data Entered by \_\_\_\_\_