

AUCTION DONATION FORM		Date :
		HARAMANA MARAMANA MA
Company Name:		
Address:		
Phone: ()	E-Mail:	
☐ Yes, we will donate the following products to the charity golf auction:  Restrictions: Please include expiration date and/or blackout dates, deadlines, advance notices etc.		
Expiration Date:	Estimated Value: \$	
$\square$ Item Donation is included with this form $\square$ Yes $\square$ No		
$\Box$ The item will be delivered to the NYC Hemop	ohilia Chapter by:	
☐ Please make a Gift Certificate for this donation (please email your high-res logo)		
Please list my company as follows:		
Signature:		

Please ensure donated item(s) are received no later than July 1st, 2022 to:

The NYC Hemophilia Chapter 500 7<sup>th</sup> Avenue (Mailroom 8A)

New York, NY 10018

The NYC Hemophilia Chapter is a non-profit 501(c)(3) organization (Tax ID# 26-1915425). Your donation is tax deductible to the maximum extent allowed by the law