

**VOLUNTEERS OF AMERICA WESTERN WASHINGTON'S  
1ST ANNUAL HUNGER PREVENTION BENEFIT EVENT  
"RECIPE FOR HOPE"  
MAY 13<sup>th</sup> 2016**

Name of Donated Item: \_\_\_\_\_

Detailed Description of Item: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fair Market Value/Retail Value: \$ \_\_\_\_\_

- |  |  |
|--|--|
| <input type="checkbox"/> I will deliver the item to VOAWW. | <input type="checkbox"/> I will mail you the item/gift certificate.    |
| <input type="checkbox"/> VOAWW will need to pick up item.  | <input type="checkbox"/> VOAWW will need to create a gift certificate. |

Special Instructions/Restrictions: \_\_\_\_\_  
\_\_\_\_\_

Donor Name: \_\_\_\_\_  
*(Name of the person or business to be listed in the program and auction materials.)*

Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name if Different: \_\_\_\_\_ Phone: \_\_\_\_\_

Website: \_\_\_\_\_

**PLEASE MAIL OR FAX TO:**

Volunteers of America Western Washington

Attn: Mark Johnson

2802 Broadway, Everett, WA 98201 Fax: (425) 258-2838

For more information call Mark at (425) 609-2214 or e-mail [mjohnson@voaww.org](mailto:mjohnson@voaww.org)

*Office Use Only*

Location \_\_\_\_\_ ITEM # \_\_\_\_\_ CAT # \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> Entered in FR __init.  | <input type="checkbox"/> Entered in Maestro __init.            |
| <input type="checkbox"/> TY Letter Sent __init. | <input type="checkbox"/> Description Entered in Program__init. |