

**Orbital Gala Silent Auction Donation**

**Name of donor:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

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

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

**Name of donation item:** \_\_\_\_\_

**Quantity:** \_\_\_\_\_

**Description of donation item (please attach sheet if necessary):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list any restrictions (e.g., blackout dates, no pets allowed, etc.):**

\_\_\_\_\_  
\_\_\_\_\_

**Estimated dollar value: \$** \_\_\_\_\_ (Please provide qualified appraisal documents if the dollar value is \$5,000 or more.)

**Donor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please note:** If available, a digital photo of the item can be placed on the Foundation website (your name will not be listed unless requested).

I would like a photo of my item to be placed on Foundation website: \_\_\_\_ Yes \_\_\_\_ No

Name to be listed: \_\_\_\_\_

**Arrangements for sending the item to the Foundation:**

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**Please submit this form using one of the following options:**

**E-mail:**

Karen Ito at [kito@aaio.org](mailto:kito@aaio.org)

**Fax:**

415.561.8567

**Mail:**

The Foundation of the American Academy of Ophthalmology  
ATTN: Development Office  
655 Beach Street  
San Francisco, CA 94109-7424

**Questions? Please contact:**

Karen Ito  
Development Manager  
**Email:** [kito@aaio.org](mailto:kito@aaio.org)  
**Phone:** 415.447.0356