



Northwest Behavioral Associates

**October 9, 2010
Westin Bellevue**

PLEASE TYPE OR PRINT WITH A BALLPOINT PEN

Donor Information

Donor or Company Name: _____

Donor Contact Person: _____

Donor's Address _____ (city, state, zip) _____

Donor Telephone Number: _____ Fax: _____

Email address for Contact Person: _____

Gift Information

Item Name: _____ **Item Value (estimated "fair market value"):** _____

Certificate _____

Material Item _____

Certificate and Material Item _____

Detailed Catalog Item Description (Quantity, size, color, restrictions, other information applicable to the understanding of the item being donated):

Restrictions and expiration date:

Auction Representative:

Representative Phone #:

Item accompanies donor form _____
Item to be delivered by donor _____

FOR CERTIFICATE ITEMS:
Certificate attached _____
Donor will provide certificate _____
NBA to create certificate _____

Please return form to:

**Northwest Behavioral Associates
3003 Northup Way, Suite 200
Bellevue, WA 98004
Phone (425) 822-6442 FAX (425) 828-3101
Federal Tax ID: 91-1993346**