



Saturday, September 15, 2012
5:00 p.m. - 8:00 p.m.
Decatur Family YMCA
1100 Clairemont Avenue
Decatur, GA 30030

Thank you so much for your donation to *The Garden of Eatin': A Taste of Decatur.* SM

RECEIPT FOR AUCTION DONATION

This is to verify that _____

(Name of Donor)

has donated _____

(Item, Service, or Gift Certificate)

for the *The Garden of Eatin': A Taste of Decatur* SM silent auction on September 15th.

Contact Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Approximate Value of Donation: \$ _____

Please check one:

I will deliver the item to D.C.M. on _____.

Please have a DCM representative pick up my donation on _____.

Please list any special considerations or arrangements:

Authorized Signature: Beth Ann - Turnbill Date: _____

Staff/Committee Signature

Instructions: Please fill out the form completely, and return it to the address below via email, fax, mail, or hand-delivery. A thank-you letter acknowledging your contribution will be mailed after the event. All event proceeds benefit Decatur Cooperative Ministry, Inc. Tax identification number 58-1082247.

Decatur Cooperative Ministry

P.O. Box 457 • Decatur, GA 30031 • sue@decaturcooperativeministry.org
Phone: 404.377.5365 • Fax: 404.370.1413 • www.decaturcooperativeministry.org