

Name (as you would like it to appear in the program) _____

Contact person _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

OFTC volunteer who contacted you _____

Item for donation _____ Retail value _____

Describe donation in detail

Special terms and conditions (please check all that apply)

- Expiration date _____
- I will be providing promotional material to be displayed with the item.
- Other restrictions _____

Gift certificate donations (please check one)

- Please create a gift certificate for my donation. I have enclosed all the necessary information.
- I am enclosing my gift certificate.

Delivery information

- I will deliver my donated item on _____
- Please arrange for an OFTC volunteer to pick up my item.

Donor's signature _____

Please print name _____

For further information, please contact Ovariations at 508-655-5412, info@ovationsfortheure.org or fax information to 508-655-5414.
Thank you for your generous support of Ovariations for the Cure. Your donation is tax deductible. Tax ID: 20-4284833.
Please check with your tax advisor.

Please return forms to:
Ovariations for the Cure
251 West Central Street, Suite 32
Natick, MA 01760

Phone 508-655-5412
Fax 508-655-5414