## Downtown Women's Center: Dinner With a Cause Auction Donation Form

FRIDAY, OCTOBER 13, 2017, at the JW MARRIOTT AT LA LIVE

Donor Information (as it should appear in all acknowledge	ements)	Solicited by		
Company Name	Conta	ct Name		
Address				
City/State/Zip				
Email				
Phone				
Donation Details (as it should appear in all printed and or	nline mater	ials)		
Name of Item	Fair Market Value			
Details of Item (If item is a vacation rental, hotel stay, or restaurant	please comp	olete the following pag	e.)	
Restrictions			•••••	
Photos Included Yes Will email by	date)	(send to KatrinaV@D	ownto	wnWomensCenter.org)
Donation Item Details (Please check all that apply)				
Item Redemption	Delivery of Item			
Please create a certificate for me. The winner can use the contact information below.	□ Iv	vill send the certifica	te/do	nation via:
Name		Email		Mail
Phone		Fax	П	Drop Off
Email	Ц		_	- · · · · · · · · · · · · · · · · · · ·

Please return this form by mail, fax, or email to: Downtown Women's Center

Downtown Women's Center Attn: Dinner With a Cause 442 S. San Pedro Street Los Angeles, CA 90013 Fax: 213.680.0844

KatrinaV@DowntownWomensCenter.org

We would appreciate the delivery of auction items to the same address.

## Downtown Women's Center: Dinner With a Cause Auction Donation Form (page 2) FRIDAY, OCTOBER 13, 2017, at the JW MARRIOTT AT LA LIVE

vac	atı	on	Re	nta	IS

Black-out/Expiration Dates or Other Restrictions					
Number of Bedrooms	Number of Bathrooms				
How many people does the rental sleep?					
Exact Location (Address, Town, City, etc.)					
Local Activities and Attractions					
Special Amenities (e.g. tennis court, personal chef, restaurant gift certificate)					
Transportation (if applicable)					
Contact Information for Reservations					
Event Tickets					
Number of Tickets	Section (Row and Seat Numbers)				
Black-out/Expiration Dates or Other Restrictions					
Parking (if applicable)					
Contact Information for Reservations					
Restaurant (We request that gift certificates expire at least one year from the event date.)					
Restaurant Name	Restaurant Neighborhood				
Restaurant Address	Restaurant Phone #:				
Restaurant City/State/Zip	Contact Name				
Expiration Date	Certificate Value				
Reservations Required?	Dress Code				
Restrictions	Type of Cuisine				
Valet or Self-Park (If valet is the cost included? If not please include	the cost )				