

OPAF & THE FIRST CLINICS FIRST BID & FIRST BET LIVE & SILENT AUCTION ITEM DONATION FORM



Please print and fax directly to OPAF at 319-235-4326

*****THIS INFORMATION WILL BE USED IN ALL PUBLICITY MATERIALS*****

*****PLEASE RESPOND PROMPTLY AND COMPLETELY*****

Contact Name: _____ Credentials (CP, CO, CPO, PhD, etc.) _____

Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail: _____ Web Site: _____

Item/Service Donating: _____

Item Description (please list everything included with item/service *and* anything NOT included; i.e. shipping, supplemental devices for use, etc.):

Restrictions, if any: _____

Expiration Date (if applicable): _____ **Retail Value of the item: \$** _____

Will the item be available at auction for highest bidder? _____ Yes _____ No

Thank you for contributing to the OPAF and the First Clinics through this event! We appreciate your support of our primary mission: enabling individuals served by members of the orthotics and prosthetics community to enjoy the rewards of personal achievement, physical fitness, and social interaction.

The O&P Assistance Fund, Inc. is a 501(c)(3) organization. Please retain a copy of this document; it is your receipt for tax purposes. Please consult your tax advisor for further information.

Please Note our New Address & Contact Information!

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