

OPAF ANNUAL SILENT AUCTION ITEM DONATION FORM



Please print and fax directly to OPAF at 215-752-5759

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

*****PLEASE RESPOND 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

If no, please provide OPAF with a certificate for display at the Silent Auction, which can be redeemed by the winning bidder.

Thank you for contributing to the O&P Assistance Fund through this event! We appreciate your support of our primary mission: enable individuals with physical disabilities 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.

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