



**25<sup>th</sup>**  
Anniversary  
Celebrating our Past,  
Building our Future

# YOUTHLIVE! GALA

## 2018 Auction Donation Form



In-Kind/Service Item \_\_\_\_\_

Donor Name (as it will appear in brochure) \_\_\_\_\_

Contact Name \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Estimated Value of Donation \_\_\_\_\_

Detailed Description of Item(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pick-up/Drop-off Date \_\_\_\_\_

Quantity Restrictions or Expiration: \_\_\_\_\_

Please check the appropriate box:

Gift certificate enclosed. We're happy to display your promotional materials with your donation.

Other \_\_\_\_\_

Donor Signature \_\_\_\_\_

We acknowledge you received no goods or services in consideration for your contribution.  
501(c)(3) I.D. #: 77-0323115

**SUBMIT TO:**

**FAX:** 408.510.3484

**MAIL:** Unity Care  
c/o Development  
400 Parkmoor Avenue, Suite 115  
San Jose, CA 95126

**CONTACT:**

**Debra Beal**  
Corporate and Community Relations  
408.971.9822 x4037  
dbeal@unitycare.org

**THANK YOU FOR HELPING OUR COMMUNITY'S MOST VULNERABLE YOUTH!**

[www.unitycare.org](http://www.unitycare.org)

[www.youth-live.com](http://www.youth-live.com)

**FOR OFFICE USE ONLY**

Item Number \_\_\_\_\_

Date Item Received \_\_\_\_\_

Thank You \_\_\_\_\_