



In-Kind Donation Form

Proceeds benefit the Florida Symphony Youth Orchestra, a nonprofit 501c3 organization

Item:		
Details:		
Retail Value: \$		
If Applicable, Expiration Date/_/_ (Re	equested date is at least 1 year from the o	event, March 4, 2018)
Restrictions? Yes □ □No		
If yes, please note restrictions:		
Contact Name:	Phone:	
Company Name:	Fax:	
Email		
Street Address:		
City:State:Zip	0	
PLEASE COMPLETE:		
• Gift Certificate or item is enclosed	l	
• Donor willdeliver ormail the	e item no later than February 4, 2017.	
• Please contact me to arrange pick	up of my donation	
Donor's Signature:	Date//	
On behalf of the Florida Symp	hony Youth Orchestra, thank you for yo	ur gift and contribution.
Please Retur	rn Form to:	
Florida Symphony Youth Orchestra Attn: Silent Auction PO Box 2328 Winter Park, FL 32790 bscales@fsyo.org		
OFFICE USE: Date Form Received	Access:	