

AUCTION DONOR FORM

Business/cultural institution name (as you would like it to appear on the program):

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Website: _____

Yes, I would like to participate by donating the following item(s) to ACG's Future 40 Gala

Yes No, I would like to make a monetary donation instead (complete payment form below)

Description of donation:

Value: _____

I wish to make a donation by:

____ Check (Payable to Albany Center Gallery)

____ Credit card

Name on credit card: _____

Card number: _____

Visa | MC | AmEx | Discover (circle one)

Expiration date: _____ CV: _____

Total amount: \$ _____

To ensure your business name appears in the Gala invitation, please complete and return form with donation, or call the Gallery no later than **September 26th**. The deadline for auction item and recognition in the program book is **October 27th**.

Please contact the gallery at director@albanycentergallery.org if you need us to pick up the donation.

Thank you for your support!

NEW ADDRESS: Albany Center Gallery, 488 Broadway, Suite 107, Albany, NY 12207