



Silent Auction Contribution Form

PLEASE COMPLETE A SEPARATE FORM FOR EACH DONATION

Brand/Donor Recognition Name:

Contact Person:

Address:

City/State/Zip:

E-mail:

Telephone:

Item(s) will be: Delivered Picked up

Item Description:

Quantity:

Value:

Restrictions (if any):

**Please email or mail this form as well as any gift certificates or packages
by October 8, 2021:**

Callen-Lorde Community Health
Center Development Office
356 West 18th Street
New York, NY 10011

development@callen-lorde.org
(646) 965-5467

All contributions to Community Health Project, Inc. d/b/a Callen-Lorde Community Health Center are tax deductible to the full extent of the law. Tax-ID 13-3409680.

Thank you for your generosity!