

Fairchild Tropical Botanic Garden
Silent Auction Request Form

Company or charity organization name _____

Contact _____

Contact title _____

Address _____

City _____ State _____ Zip _____

Tel _____ Fax _____

E-mail _____ Website _____

Name of event _____ Date of event _____

Would you like packet mailed or will someone pick up _____

Address and to whom package should be mailed too _____

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For FTBG use only

Date request received _____ Approved by _____

Donation _____ Date sent _____

Item donated _____

Item description _____

Value _____ Expiration _____

Special Instruction _____

Please Return To:

Mari Novo
Director of Member and Donor Services
Telephone: (305) 663-8057
Fax: 305.661.8953
mnovo@fairchildgarden.org