

**CANCER COUNCIL OF RENO COUNTY  
PURSE AUCTION  
ITEM COMMITMENT FORM**

**DONOR INFORMATION (REQUIRED):**

**Please print donor name as it should appear in the program and mobile bidding:**

Donor Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

If a Business Donor – Contact Name: \_\_\_\_\_

**ITEM DESCRIPTION: (PLEASE PLEASE PLEASE write up a good description!)**

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

**MARKET VALUE OF ITEM (REQUIRED):** \$ \_\_\_\_\_

**MUST INCLUDE RECEIPT OR PRICE TAG ON ALL HANDBAGS**

Special Instructions: \_\_\_\_\_

Committee Member / Solicitor: \_\_\_\_\_

Member's Phone number \_\_\_\_\_

Date: \_\_\_\_\_

Questions or suggestions?  
Katie Thacker 785 -250 -6129

**PLEASE RETURN FORM OR PUT IN WITH THE PURSE:**  
P. O. Box 633, Hutchinson, KS 67504-0633 or fax to 1-888-606-8313