



COLORADO
METALSMITHING
ASSOCIATION

Silent Auction Donation Form

(ONE FORM PER ITEM, PLEASE)

Your Name: _____

Mailing Address: _____

E-Mail: _____

Phone Number: (_____) _____ - _____

Date Dropped off: _____

Item Donated: _____

Retail Value: \$ _____ Preferred Opening Bid: \$ _____

Preferred Min Increased By: \$ _____

Description of Item: _____

Prefer to remain anonymous? Yes No

Item # _____ (COMA USE)

**IF YOU ARE NOT COMING TO THE CONFERENCE OR PREFER TO SEND/DROP OFF YOUR DONATION
ITEM IN ADVANCE, YOU CAN MAIL/DROP OFF ITEMS WITH CORRESPONDING FORMS BY JULY 12TH**

TO: COMA AUCTION, % KIM HARRELL, 576 HANOVER WAY, STE. B, AURORA, CO, 80010.

OR YOU CAN SEND TO OUR COMA PO BOX #200514, DENVER, CO 80220.