

KEEP MEMORY ALIVE

Supporting the Mission of Cleveland Clinic Lou Ruvo Center for Brain Health

ALZHEIMER'S | HUNTINGTON'S | PARKINSON'S

MULTIPLE SYSTEM ATROPHY | MULTIPLE SCLEROSIS



Cleveland Clinic

Lou Ruvo Center for Brain Health

In-Kind Donation Form

All forms should be emailed or faxed to:

Anna Robins | robinsa@ccf.org | Fax: 702.260.9797

Donor Name (Company or Individual): _____

(As you would like to see your donation acknowledged in print.)

Contact Person- Name/Title: _____

(To address donation acknowledgement letter to- if not the same as above.)

Email: _____ Phone: _____

Address: _____

City/State: _____ Zip: _____

Item Donation Information: Please supply a high resolution image of the item (or logo of the company)

Name of Item/Package:			
Retail Value:		<i>Per IRS standards- A retail value of any hard costs associated with a package MUST be listed, even if part of the package is priceless (like a meet & greet or celebrity experience). If the value exceeds \$5,000 a receipt/PO/invoice must be included.</i>	
Description: <i>Include quantity and any exciting details and description notes for the item.</i>			
Donation Restrictions: <i>State any limitations, special restrictions and expiration date.</i>			
Contact for Redemption:		Phone/Email:	
Have you provided an image (300dpi) of the auction item:	YES	NO	

If your donation is a collectable or piece of memorabilia, it MUST be accompanied by a certificate of authenticity or appraisal.

Artwork Specifications: Please fill this portion out only if you are donating a piece of artwork

Name of Artist:			
Title of work:			
Medium:		Dimensions: <i>in inches</i>	
Current estimated Value:		<i>A certificate of authenticity and/or an appraisal must accompany the donated work.</i>	

Please provide gallery, studio, private dealer or previous owner where artwork was purchased and available contact information:

Name:		Phone:	
Address:		Email:	

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Method of delivery:

<input type="checkbox"/>	I will mail the item/original certificate: Keep Memory Alive Attn: Anna Robins 888 W. Bonneville Ave. Las Vegas, NV 89106	<input type="checkbox"/>	Please pick up my item (available for <u>Las Vegas ONLY</u>) We will follow up to coordinate/arrange a pick up
<input type="checkbox"/>	KMA has my permission to create a certificate	<input type="checkbox"/>	Certificate to be emailed for KMA to print out

Please carefully read the following and sign below:

- Upon donation, this item becomes the property of Keep Memory Alive. Such donation may be sold at auction, in Keep Memory Alive's sole discretion, at various events or platforms.
- Keep Memory Alive will not provide you with the final selling price of your donated item.
- Some donated items may be combined with other donated items to create a larger package.
- Keep Memory Alive did not provide any goods or service in whole or part for the above donation.
- All donations are tax deductible. You will receive a letter acknowledging the donation. Consult with your tax professional for the appropriate tax deduction.
- There are specific IRS rules for donations of artwork based on the value of the proposed gift. Please consult a tax professional about your proposed gift of artwork as additional IRS rules apply as the value of your proposed gift increases.
- Keep Memory Alive has my permission to use the supplied image or logo online or in print to accompany the donation listing.

Donor Signature: _____ Date: _____

All proceeds raised through this donation support patients of Cleveland Clinic Lou Ruvo Center for Brain Health and their families. Your generosity funds our social service programs, research trials and caregiver education for those families battling Alzheimer's, Huntington's, Parkinson's, multiple sclerosis and multiple system atrophy. Thank you for your donation!

Power of Love gala auction items are due September 17, 2021.
Forms received after this date are not guaranteed to appear in the printed program.
Please keep a copy of this signed form for your records.
Keep Memory Alive is a 501(c)(3) organization. Tax exempt ID number 88-0515534.

For Internal Use Only:	
Date Received: _____	Form Completed: _____
Logo Received: _____	Item Received: _____