

Quilt # \_\_\_\_\_

# FESTIVAL OF TREES

## ITEMIZATION OF EXPENSES

### Quilt Block

**Please complete this form and turn it in with your quilt.**

In order to raise as much as possible for the children at Primary Children’s Medical Center, it is our intent to price all auction items to sell. To reach this goal, and to comply with IRS requirements, we need your help. It is the responsibility of the quilter to maintain careful records and keep receipts of costs involved with the donated item. This form will assist the Festival of Trees Executive Board in determining a fair base price for auction items. The Festival of Trees Executive Board retains the right to adjust the price of any item to what the market will bear. **To receive a tax receipt, bring all receipts for purchased items associated with your quilt.**

Quilt Name: \_\_\_\_\_  
 Designer: \_\_\_\_\_  
 Contact Name (if different than designer): \_\_\_\_\_  
 Designer Telephone Number: \_\_\_\_\_

Please list each item in only one column.			
Quantity	Item Description	Estimated Price of Donated Item	Received Price of Purchased Item
		<b>Sub Total:</b>	<b>Sub Total:</b>

Add both columns for a final total: \$ \_\_\_\_\_

***Thank you for your “Gift of Love”***

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