

SEASON OF HOPE



Join us! The **Season of Hope Gala** will be held on Friday, **December 2, 2022** at The Whitley.

Our hope is for you to support our community's children by donating to this fundraising event. All money raised through this event will benefit Marcus Autism Center, a subsidiary of Children's Healthcare of Atlanta. Since 2018, the event has raised more than \$1M for Marcus.

Autism affects an estimated **1 in 44** children in the United States and is a lifelong condition for most.

At Marcus, we are:

- Continuing to advance our understanding of the development of autism spectrum disorder (ASD).
- Providing treatments to children that in many cases limits or preempts severe disabilities from developing.
- Defining the standardization of diagnoses, interventions, and treatment plans that can be utilized by healthcare and education systems for the benefit of all children with autism and developmental delays.

With your support, Marcus Autism Center will transform the landscape for families living with autism today and in the future, making autism an issue of diversity, not disability.

Enclosed, you will find an auction donation form. Please do not hesitate to reach out to Ashley Miller, Development Officer at Children's, with any questions at Ashley.miller@choa.org.

Your support is truly making an impact on the life of a child, and we would be honored to have you join our efforts in support of Marcus Autism Center.

Sincerely,

A handwritten signature in black ink that reads "Kate Peterson".

Kate Peterson
2022 Season of Hope Chair

A handwritten signature in black ink that reads "Monetha Cobb".

Monetha Cobb
2022 Season of Hope Auction Chair

Auction inclusion deadline is November 1, 2022.

2022 AUCTION DONATION FORM

DONOR INFORMATION (PLEASE PRINT CLEARLY)	
Donor or Company Name:	
Donor Address:	Contact Person:
	Email:
	Phone:
Donor's Signature (Required):	
ITEM INFORMATION	
Short Description of Item: (ex. "Braves Tickets" or "30A Vacation Home"):	
Detailed Description of item (as to appear in catalog): Include any restrictions on trips, tickets and travel, size, color and/or other information to ensure proper understanding of donated item.	
Expiration Date:	Donor's Good Faith Estimate of the Fair Market Value* \$ _____
*Federal Tax I.D. _____	
AUCTION ACQUISITION	
<input type="checkbox"/> Item delivered with form by: _____ <input type="checkbox"/> Donation will be delivered by: _____ <input type="checkbox"/> No physical item. Please use donor's contact above for redemption.	
<p>Please retain a copy of this form for your records. Children's Healthcare of Atlanta is a not-for-profit organization. Tax ID number is 58-1710601. *The taxpayer is responsible for determining the fair market value of donated property. Please see IRS publications 526 and 561 for further guidance.</p> <p>*If fair market value of item is over \$5,000, donor must provide their Federal Tax I.D # to claim a deduction. Children's will provide IRS form 8283 to complete.</p>	

PLEASE MAIL or EMAIL COMPLETED FORM TO:

Children's Healthcare of Atlanta Foundation
 Attn: Season of Hope / Ashley Miller
 1575 NE Expressway | Atlanta, GA 30329
Ashley.Miller@choa.org