

Auction Donation Form



Tax ID: 04-2499107

Date Submitted: _____

Donor Information

Donor Name (As it will appear in Program): _____

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Phone #: _____

Website: _____

Donor's Affiliation with School:

- Alumni Current Parent Friend or Business Graduate Parent Staff Student

Donation Information

Donation Type:

- Catalog Advertisement: Gift Certificate Service Item Monetary
- Bus. card - \$40.00 Cert. provided by Donor
- ¼ page - \$80.00 Need to Make Cert.
- ½ page - \$150.00
- Full page - \$250.00

Description of item: _____

Specific Restrictions, Instructions, and/or Expiration Date: _____

Value: \$ _____

Delivery Instructions: (How and when will we get item?) _____

Solicitor's Information

- Alumni Current Parent Friend or Business Graduate Parent Staff Student

Name: _____ Phone: _____

E-Mail: _____

TY by _____ on _____