



2019 Dinner Auction Donation Form

CONTACT INFORMATION

DONOR/COMPANY NAME: _____

CONTACT PERSON (IF DONOR IS A COMPANY): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

DO YOU WISH TO REMAIN ANONYMOUS? YES / NO

ITEM INFORMATION

NAME OF DONATED ITEM: _____

DESCRIPTION: _____

CONDITIONS/RESTRICTIONS: _____

EXPIRATION DATE: _____ ESTIMATED FAIR MARKET VALUE: _____

GIFT CERTIFICATE ITEM ATTACHED DONOR WILL DELIVER NEED ITEM PICKED UP

DONOR/AUTHORIZED ORGANIZATION REPRESENTATIVE NAME: _____

DONOR/REPRESENTATIVE SIGNATURE : _____ DATE: _____

Trinity Catholic High School is a tax exempt, not for profit organization. Your contributions are tax deductible to the extent allowed by law. Upon completion of this form, a staff member will sign it and a copy will be returned to you for your personal files. For tax references, our Federal Tax ID # is 43-0653242.

FOR OFFICE USE ONLY

TCHS REPRESENTATIVE NAME _____ **TITLE:** _____

SIGNATURE : _____ DATE: _____

SECONDARY APPROVER NAME (FOR DONATIONS GREATER THAN \$5,000): _____

TITLE: _____ SIGNATURE: _____ DATE: _____