St Madeleine Sophie Auction
P.R.I.S.M. ▲ 2008

DEADLINE
February 29th 2008

Tracking #

Donor: Please Complete #1-6. Please print clearly using ball point pen. Use a separate form for each donated item.

For Office Use Only:
Catalog #_____Combine with #_____

1 Donor Information

Print Name:_____
(as to appear in catalog)

Signature: _____Date: _____

Contact Person: _____

Address: _____

City/State/Zip: _____

Phone: (home)_____(work) _____

Donor is a: (please check one)

☐ Parent ☐ Parishioner ☐ Business
☐ Student/Faculty ☐ Friend ☐ Other

3 Item Description: Please provide detailed description of item; size, color, brand, limitations/restrictions. Attach additional description if needed.

Please check:
☐ Tangible Item ☐ Gift Certificate ☐ Both
☐ Expiration date___/___/___ ☐ No Expiration Date

4 Estimated Value of Item:

$ _____

2 Solicitor Information

_____
Print Name

_____
Signature Date

_____
Contact Phone

5 Please Indicate:

☐ Item or gift certificate accompanies this form.
☐ Item or gift certificate to be delivered by auction date.
***Indicate Tracking #** on items when delivering later**
☐ Call to arrange pick-up.
☐ Auction Committee should create gift certificate.

6 Cash Donation: $ _____

Please make check payable to St. Madeleine Sophie Auction.

☐ Advertising
☐ Patron
☐ Class Project
☐ Other

☐ Contact me regarding my company's matching gift program.

For the Donor's records: This certifies that the Donor has not received anything of value in exchange for this contribution.

St. Madeleine Sophie Parish and School ▲ -4400 130th PL SE, Bellevue, WA 98006- ▲ (425) 747-6770 x 164 ▲ Fax (425) 747-6349

Please keep the bottom copy for your records. ▲Tax ID # 91-0839141 Thank you for your donation!