

St. Michael's Auction

Donation Form

DONOR'S NAME	
ADDRESS FOR TAX RECEIPTS (only for cash donation of \$25 or more)	
PHONE NUMBER	
DATE DONATED	
CHILD'S GRADE: _____	ENVELOPE # (only for parishioners): _____

DONATION DETAILS

Item(s) or Service(s)

Description:

Value: \$ _____

Cash \$200 \$150 \$100 Other: \$ _____

*Please make cheques payable to **St. Michael's Parish***

Gift Card \$200 \$150 \$100 Other: \$ _____

Please include cash register receipt with all gift cards

Would you like us to acknowledge your generous contribution?

Yes No

If yes, please choose one:

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Please attach this form to your donation. It helps us to thank you properly and assign the correct value to the donation.