



Auction Donation Form

FOR OFFICE USE ONLY

Gift Receipt Date _____ Inventory # _____
 Date Acknowledged _____ Room # _____
 Gift Renewal YES NO Auction Item # _____

Gift Item _____

Business/Individual Donor Name _____

Parent (Student's Year ____)

Alum (Graduation Year ____)

Faculty/Staff

Friend

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Contact Person for Business Donor: Dr. Mr. Mrs. Ms. _____

How Donor's Name Should Appear in Program: _____

Certificate Item Yes No Cash/Check? Yes No Amount: _____
 Prep/Villa Makes Gift Certificate Donor Provides Gift Certificate Expiration Date _____

Donor stated value of gift: \$ _____.

Detailed description of gift for event: (Please include special instructions or restrictions)

PICK-UP NECESSARY. NO PICK-UP NECESSARY.

Please include date and location for gift pick-up.

Date: _____ Location: _____

Return this form to:

**LEGACY GALA**

Attn: Prep Advancement Office, 225 West Ninth Street, Erie, PA 16501
 (814) 453-7737, ext. 2294, Fax 455-5462, kgrieser@cathedral-prep.com



Legacy Gala Solicitor: _____

*Name**Date*

All Legacy Gala donors will receive a written acknowledgement. Gifts are tax deductible as stated in the IRS code.