

FEBRUARY 28, 2014 | 6:30 - 10:00 PM stleosch.ejoinme.org/CasinoRoyale2014

DONOR CONTRACT

Please complete this contract to donate an auction item or visit our website to donate on-line.

Donated by:				
Donated by	(name as it should appear on the event website and in the Gala program)			
Name:				
Address:				
	Street # and Name	City	State	Zip Code
Phone:	Email:			
Item / Service	e Description:			
	•			
Approximate	Value:			
	formation / Restriction			
Additionatin	ioimadon / Restriction			
-				
Donor's Sign	ature:			
Date:				
On behalf of	St. Leo the Great Catholic t	: School, we would like ax deductible gift.	to express our grat	titude for your
To be comp	pleted by the Gala Committe	ee:		
Item #:				
Item Picker	d up by:			
	nittee Member's Signature:			