



**AVE  
MARIA**  
CATHOLIC SCHOOL

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# DONOR FORM

DATE/EVENT: \_\_\_\_\_

COMPANY/INDIVIDUAL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DONOR STATED VALUE: \$ \_\_\_\_\_ ANONYMOUS DONOR? YES NO

DONOR SIGNATURE: \_\_\_\_\_

SOLICITOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

## DETAILED DESCRIPTION OF ITEMS & RESTRICTIONS

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ITEM EXCHANGEABLE? YES NO

GIFT CERTIFICATE Expires \_\_\_/\_\_\_/\_\_\_ DONOR PROVIDES \_\_\_\_\_ AMCS PROVIDES \_\_\_\_\_

### FOR AMCS USE ONLY

|                                  |                              |
|----------------------------------|------------------------------|
|                                  | ITEM #                       |
| CATEGORY:                        | TAG: # OF ITEMS:             |
| DONATION FORM COMPLETE? ___Y___N | PHOTO:                       |
| ENVELOPE: ___Y___N               | WINNER CERTIFICATE:          |
| DISPLAY CERTIFICATE:             | ENTERED INTO GREATER GIVING: |
| NOTES:                           | GG TRACKING# _____           |
|                                  | COMPLETED:                   |
| PACKING INFO:                    | TY:                          |

THANK YOU FOR YOUR DONATION TO AVE MARIA CATHOLIC SCHOOL

**PLEASE KEEP A COPY OF THIS FORM AS YOUR RECEIPT**