

Thank you for bringing in a contribution to our Silent Auction. Please complete this form and submit it with the item along with 2 business cards (if applicable) to your Classroom Representative.

For each item donated, please fill in both Form A and Form B.

Donation Information Form A

Parent Name and Phone Number:

Classroom: MWF TR TWR AM/PM JR/SR (Please circle)

Donor/Organization name:

Relationship to School:

Mailing address:

Phone:

E-mail :

Please describe your item:

Fair Market Value \$ _____ For Taxation Purposes Only

Charitable Registration Number 88791 8183 RR0001

Purchase receipt is required for all donations.

*** Receipts can be provided for cash donations over \$50.**

Donation Information Form B

Parent Name and Phone Number:

Classroom: MWF TR TWR AM/PM JR/SR (Please circle)

Donor/Organization name:

Relationship to School:

Mailing address:

Phone:

E-mail :

Please describe your item:

Fair Market Value \$ _____ For Taxation Purposes Only

Charitable Registration Number 88791 8183 RR0001

Purchase receipt is required for all donations.

Thank You for Supporting Campus Pre-School!