

Donor Signature: ___

WINGS AUCTION 2024 DONATION FORM

Note: Please use one form for each item donated.

I. CONTACT INFORMATION	N .				
Donor/Company Name:	Nata	. Places with a small server vials it to	nners in our coast materials and for sinner		
		Note: Please print name as you wish it to appear in our event materials and/or signage.			
Contact Name (if donor is a comp	oany):				
Address:		City:	State:	Zip:	
Phone:	Email:		Website:		
II. DONATED ITEM INFORM	MATION				
Name of Item Donated:					
Cost, Fair Market Value, or Donor	r's Estimate of Value	e (for IRS purposes): _			
Describe the item below. Please d reverse side of this page if needed		ully if your donation co	ontains multiple services or	products, and use the	
III. SERVICE OR GIFT CERTI If you are donating a gift certificate please include the following inform • The full description of what is ince • The name, email, and phone nu • The complete contact information • The expiration date (if applicable) • Any additional information, such IV. DELIVERY OPTIONS (PLITE INC.) Enclosed Drop off the item(s) to St. Editations.	te for a service and mation in the gift ce cluded and what is mber of the person in for you or your cole) of any goods or as a photo or bro	I require St. Edward Histrificate or in a separal excluded to contact for further isompany, including nany services and instruction others.	igh School to create the W te letter. nformation ne, address, phone, and e ns on how to redeem the	email item	
Ship the item(s) to St. Edward	l High School's Dev	elopment Office, to ar	rive by		
Please return the completed form to Traci 2 Traci at (216) 227-2227.	Zahn, Director of Develo	opment, at St. Edward High S	School or email tzahn@sehs.net.	For further information, contact	
Thank you for your tax-deductible gift. St. This donation becomes the property of St. St. Edward High School.					
Plo	ease Return Comp	leted Donation Form	By March 25, 2024		
Donor Signature:		Date:	Committee S	Solicitor:	

Date: ___