

DONATION FORM

PLEASE LEAVE WITH BUSINESS OFFICE

Event:AuctionI	Round-UpSty	le Show _	Other		
Please complete all informati underline the single letter by					
Donor Name:					
Optional: I prefer to be liste	d as:A friend of S	St. Thomas	Anonymous	Other	
Address			City	State	Zip
Authorized By/Contact				Phone	
Description of Item, Service	e or Certificate:				
Tangible Item Cer	tificate or Both	1	Fair	Market Value:	
Expiration Date or Restrict	tions (if any):				
Item/Certificate is:					
Attached Will be o	lelivered/mailed on		So	licitor will pick up on _	
		Date			Date
Donor Signature	Da	te	School Represer	tative Name	Date

St. Thomas High School gratefully acknowledges your generous support.

St. Thomas High School has not provided you with any goods or services in exchange for this contribution. St. Thomas High School is a Tax Exempt 501(c)(3) Non-Profit Organization.

4500 Memorial Drive Houston, Texas 77007 713-864-6348 (ph) 713-864-5750 (fax) www.sths.org