



**COMMITTEE USE ONLY**

**Item #**

Certificate

Donor

Committee

**AUCTION DONATION FORM**

St. Paul Catholic Church  
 1412 9<sup>th</sup> Street, Highland, IL 62249  
 Phone: 618-654-2339 Fax: 618-654-9980

**Donor Information:**     name may be published     donor wishes to remain anonymous

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

If business, name contact person: \_\_\_\_\_

**Item or service donated:** \_\_\_\_\_

**Specifics regarding donation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Value of donation:** \$ \_\_\_\_\_ (use estimate if exact cost is unknown)

Your donation to the St. Paul Kirchenfest is tax deductible. This form will serve as your receipt.  
 Thank you for your generous support!

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Kirchenfest Committee Member

Note: The solicitor is not authorized to render or provide any estimate or statement of value for goods and/or services donated.

No goods or services were provided to you by the Church in connection with this contribution.

**\*\*Please return white copy to auction chairperson. Attach yellow copy to item donated. Donor retains pink copy.\*\***