



ALL SAINTS'

Episcopal Church & Day School

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All Saints' Episcopal Church – Friends of Music – Donation Agreement

DATE: _____ SOLICITOR: _____

DONOR INFORMATION:

DONOR NAME _____

COMPANY/ORGANIZATION _____ WEBSITE _____

ADDRESS _____

CITY, STATE, ZIP _____

CORPORATE CONTACT _____

PHONE (HM) _____ (WK) _____ (FAX) _____

EMAIL _____

SIGNATURE OF DONOR _____ DATE _____

PROGRAM RECOGNITION: (Please be specific as to how you wish to be listed in the program).

DONATION:

ITEM: (Please describe)

Restrictions: _____

Expiration Date: _____ Cash Donations: \$ _____

Declared Value: _____

Please check appropriate space:

Item needs to be picked up. Item will be ready for pickup by: _____

Item will be delivered. Anticipated delivery date: _____

Item enclosed

Certificate enclosed

Auction committee to create certificate on behalf of donor

SPECIAL REQUESTS OR COMMENTS:

All Saints' Episcopal Church and Day School is a 501(c)(3) organization. We gratefully acknowledge your generous donation which may be tax deductible. Please consult with your tax advisor. Thank you.