Sarasota Christia	an School	l Auction D	onation Form	1	Entered 4999
	ota, FL 34232		481or Fax: (941) 371-0898	J.A.	
TEM NAME:			CONTACT:		
·					
TEM DESCRIPTION / RESTRICTIONS (Attach Add	ditional Sheet If Needed)			FAIR MARKET VA	ALUE (Estimated)
IFT CERTIFICATE EXPIRATION (Minimum of 6 n	nonths from date of aucti	on)			
OONOR:					
ADDRESS:			PHONE:		
ITY: S	TATE:	ZIP:	FAX/EMAIL:		
DONOR'S SIGNATURE: <b>X</b>			DATE:		
OLICITOR: (If applicable)			PHONE:		
EACHER: (If applicable)	Parent Business	Parent Alumni of Alumni SCS	Employee Other turned	L	Other:
FOR AUCTION USE ONLY UCTION TYPE:	Tangible Item	Certificate Item	SCS to Create Certificate	Package Item	d

Thank you for your generous support! This is your tax receipt.

Note: Sarasota Christian School did not provide any goods or services in whole or partial consideration for the above described donation.

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