

# Silent Auction Donation Form



Auction Date : \_\_\_\_\_

## **Donor Information**

Donor Name : \_\_\_\_\_  
*Enter name as it is to appear in event brochure*

Contact Name : \_\_\_\_\_ Phone Number : \_\_\_\_\_

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

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

Email address : \_\_\_\_\_

## **Donated Item or Service Information**

*Please describe in detail and include all restrictions.*

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Retail Value \$ \_\_\_\_\_ Item is to be : ☐ Delivered ☐ Picked up ☐ Given to : \_\_\_\_\_

Donor Signature : \_\_\_\_\_ Title : \_\_\_\_\_

Date : \_\_\_\_\_

On behalf of Saint Benedict Catholic School and the Saint Benedict School PTO, please accept our sincere gratitude for your tax deductible gift. Saint Benedict Catholic School is a non-profit organization and we sincerely appreciate your contribution to our important endeavor.

If you should have any questions concerning your donation, please contact the committee person below. Thank you.

PTO Contact : \_\_\_\_\_ Phone Number : \_\_\_\_\_

***Saint Benedict Catholic School • EIN 54-1752652***  
***3100 Grove Avenue, Richmond, VA 23221***  
***Phone 804-254-8850 • Fax 804-254-9163***  
***www.saintbenedictschool.org***

Please keep the yellow copy for your tax records. THANK YOU!