



AUCTION DONATION AGREEMENT

DONOR INFORMATION

DONOR NAME(S): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

DONATION INFORMATION

NAME OF GIFT OR CASH DONATION: _____ VALUE: _____

SPECIFIC DESCRIPTION OF ITEM(S) OR SERVICE(S): _____

DELIVERY INFORMATION

____ I WILL MAIL DONATIONS OF CERTIFICATES/TICKETS/CHECKS (MADE OUT TO ST. ALPHONSUS PARISH) TO OR DELIVER ITEMS TO ST. ALPHONSUS PARISH OFFICE (PMC BUILDING), 5960 W. LOOMIS ROAD, GREENDALE, WI, 53129.

____ PLEASE CONTACT ME TO ARRANGE PICK-UP OF MY DONATION.

YOUR DONATIONS ARE TAX DEDUCTIBLE! ST. ALPHONSUS PARISH'S FEIN IS 39-0850860.

DONATIONS MUST BE RECEIVED BY APRIL 18, 2025 IN ORDER TO BE INCLUDED IN OUR AUCTION BOOKLET.

PLEASE MAIL OR FAX THIS FORM TO ST. ALPHONSUS PARISH.

FOR MORE INFORMATION, PLEASE CONTACT AUCTION CO-CHAIRS

AMY SCHERMETZLER (ASCHERMETZLER@ST-ALPHONSUS.ORG) OR DAWN EISOLD (DAWN.EISOLD@GMAIL.COM).

THANK YOU FOR YOUR SUPPORT!

PHONE: 414-421-2442 | FAX: 414-421-8744 | WEBSITE: ST-ALPHONSUS.ORG | EMAIL: STALS@ST-ALPHONSUS.ORG