



Good Shepherd Catholic Church
 12800 W. 75th Street
 Shawnee, KS 66216
 Phone: 913.631.7116
 Fax: 913.631.3539

Donor Form

Name of Donor _____ Individual Business

Donor Listing For Recognition _____ Check Here if You Wish to Remain Anonymous

Address _____ City, State, Zip _____

Contact Name: (if different from donor) _____ Email: _____

Phone: _____ Interested in program advertising & a listing in the website directory? Check here and someone will contact you.

Donation (Except Cash) Donor Stated Value (required) \$ _____ (Value for Catalog Information)

Item to be delivered to church office

Item delivered with form

In-kind donation (services, supplies, etc. describe below)

Please have someone from Good Shepherd contact me to arrange pick up

Item Description

_____ Attach additional copies of this form as needed.

_____ Exp Date: _____

Cash Donation \$ _____ (Donations \$500 or more receive recognition* in program)
 Cash Donations are used toward items sold at the auction. Great if you don't know what to give!

Due Dates

Auction items requested by March 23.

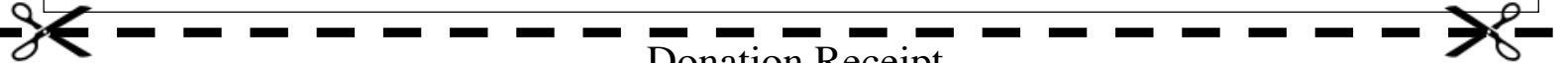
*Items must be received by April 1 for inclusion in program (if applicable).

Sign Here

I understand that the fair market value of my contribution may be tax-deductible as allowed by law, and that I should consult my tax adviser regarding special conditions of my gift. Further, I understand that all proceeds generated as a result of the sale and/or auction of my donation will benefit Good Shepherd Catholic Church.

Donor Signature _____ Date _____

<u>OFFICE</u>	<u>DATABASE</u>	<input type="checkbox"/>	<u>COMMITTEE</u>
Received by: _____	Input By _____ Date _____		Donation Location: _____
Date Received: _____	Procurement # _____		Live Auction Item..... <input type="checkbox"/> (Committee -complete live donation form)
Notes: _____	Auction Type _____		Certificate Needed <input type="checkbox"/>
	Category Name _____		Other Action Needed..... <input type="checkbox"/>



Donation Receipt

(cut here or make a copy of this page for your records)

Name of Donor _____ Date _____

Donation Description	Value
_____	_____
_____	_____

Thank you for your donation! Keep the bottom portion for your records, return the top portion to:
 Good Shepherd Lollapalooza • 12800 W. 75th St. • Shawnee, KS 66216 • 913-631-7116