



The Dominican

COMMUNITY of SCHOOLS

DOMINICAN GALA AUCTION CONTRACT

Category _____

Item # _____

Storage Location _____

Date Keyed _____

Acknowledgment _____

Item Donated: _____ Retail Value \$ _____

Complete Description (including restrictions)

Gift Certificate

- Gift Certificate Attached
- Will Mail
- SAA-SDS to make Gift Cert.

(Please include complete address)

Donor Firm (As it will appear in program) _____ Telephone _____

Contact Name _____ Title _____ Donor is: Parent of SAA-SDS

Alumnus of SAA-SDS

Grandparent of SAA-SDS

Address _____

City _____ State _____ Zip _____

Donor Signature _____ Date of Contract _____

Donation Acquired By: _____ Telephone _____ SAA-SDS Parent

Thank You for your Donation.