



# Donation Form

Tax Exempt ID Number: 48-1025846

Item Solicited by:

Phone #:

## Step 1 Donor Information

**This gift is from a Business/Organization**

**OR**

**This gift is from an Individual/Family**

\_\_\_\_\_

Mr & Mrs.  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

*Name of Business /Foundation/Organization*  
*This name will appear on printed materials/website unless marked anonymous below.)*

\_\_\_\_\_  
*Name(s) MI Last*

Mr & Mrs.  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

*Name to publish, if different (ex: Aunt Mary) This name will appear on printed materials/website unless marked anonymous below.)*

\_\_\_\_\_  
*Contact Person: Name MI Last*

\_\_\_\_\_  
*Position/Title*

## Step 2 Optional Gift Information

This gift is anonymous

## Step 3 Address

*E-mail (This is our most cost-effective way to send you a tax receipt. We do not rent, share or sell your information)*

\_\_\_\_\_  
*Address City State Zip*

\_\_\_\_\_  
*Phone  Home  Work  Cell Fax*

## Step 4 Donation (Please be specific as this is the information used in any printed description.)

Type of Donation:  Cash  Gift Certificate  Item as described below Value\*: \_\_\_\_\_

Item Name \_\_\_\_\_

Item Description \_\_\_\_\_

\_\_\_\_\_

Item/Certificate:

received now.

will be delivered by donor on (date) \_\_\_\_\_ to (location) \_\_\_\_\_.

needs to be picked up on (date) \_\_\_\_\_ by (name) \_\_\_\_\_ from (location) \_\_\_\_\_

Create Holy Cross Certificate for this donation.

Item #	Sec #	Package #
Date Entered	Entered By:	

White-Master Copy                      Yellow-Attach to Item                      Pink Copy—Donor

\*Value should be Fair Market Value—Consult Tax Advisor for information regarding taxable donation amount.

Church: 8311 W. 93<sup>rd</sup> Street, Overland Park, KS 66212  
 School: 8101 W. 95<sup>th</sup> Street, Overland Park, KS 66212

Office (913) 381-2755 Fax (913) 381-2766  
 Office (913) 381-7408 Fax (913) 381-1312