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| Cherry Crest Elementary School | | | | |  |  | | --- | --- | | Cherry Crest Elementary PTSA Fundraiser | | | Donation Form |  | | 12400 NE 32nd Street, Bellevue, WA 98005 | | | Phone: 425-456-4900 |  | | Fax: 425-456-4911 |  | | |
|  | | | | | | |  | ***Office Use*** |
| Donor Name (Please list exactly as you wish for it to be printed in the catalog) | | |  | | | |  | Item Number |
| Donor Address | | |  | | | |  | **Notes:** |
| Contact Name (if different from donor name) | | |  | | | |  | Donations to Cherry Crest Elementary are tax-deductible to extent allowed by law.  **Federal Tax ID #91-1239797** |
| Phone | | |  | | | |  |
| Email | | |  | | | |  |
| **ITEM DONATION** | | | | | | | | |
| Name of Item | |  | | | | | | |
| Market Value of Item | |  | | | | | | |
| Detailed Description | | *Please be as detailed as possible* | | | | | | |
| **ITEM/CERTIFICATE** | | | | | | | | |
| Please check one: | | | | | | | | |
|  | Included with this form | | | | | | | |
|  | Will be delivered | | | | Date – | | | |
|  | Needs to be picked up | | | | Date | | | |
| Expiration Date or Restrictions, if any (expiration default is one year from date of auction)  N/A | | | | | | | | |
| **Donor Signature** | | | | | | | **Date** | |
|  | | | | | | |  | |
| Print Name | | | | | | |  | |