

THE LEGACY GALA



2019 GIFT DONATION FORM

PLEASE LIST INFORMATION EXACTLY HOW IT SHOULD APPEAR IN PRINTED MATERIALS:

NAME OF BUSINESS: _____

CONTACT NAME/TITLE: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ (EXT.) _____ FAX: _____

EMAIL: _____

WEBSITE: _____

DONATION DESCRIPTION (incl. restrictions, black-out dates, size, color, etc):

ESTIMATED RETAIL VALUE \$ _____ **CASH DONATION** \$ _____

EXPIRATION/RESTRICTIONS: _____

DONATION ENCLOSED WITH FORM YES NO

I have enclosed brochures, photos and/or materials to display.

THANK YOU FOR YOUR GENEROSITY

DONATIONS MUST BE RECEIVED AT BMC BY **OCTOBER 4TH** TO BE INCLUDED IN THE PROGRAM

For more information, contact Jeany Vasquez at 407-293-7561, ext. 226 or Vasquezj@bishopmoore.org
Bishop Moore Catholic · 3901 Edgewater Drive Orlando, FL 32804

FOR OFFICE USE ONLY

- | | | |
|---|---|---|
| <input type="checkbox"/> Item # _____ | <input type="checkbox"/> Buy-it-now __Yes or __No | <input type="checkbox"/> Complete __Yes or __No |
| <input type="checkbox"/> Starting Bid _____ | <input type="checkbox"/> Certificate needed __Yes or __No | <input type="checkbox"/> Entered by _____ |
| <input type="checkbox"/> Increment _____ | <input type="checkbox"/> Picture __Yes or __No | <input type="checkbox"/> Date _____ |
| <input type="checkbox"/> Logo __Yes or __No | <input type="checkbox"/> Basket __Yes or __No | |