



J.E. Cosgriff Memorial Catholic School and St. Ambrose Church Donor Agreement

2335 Redondo Avenue • Salt Lake City, UT 84108 / www.cosgriff.org

OFFICE USE ONLY:

Item # _____

Item Type _____

Category _____

Package # _____

DONATION INFO

Donated Item _____

Item Description _____

Estimated Retail Value \$ _____

Restrictions/Expiration Date: _____

Gift Certificate: Circle One N/A Included with form Donor will send by _____ Date _____ Cosgriff to create

Delivery Info: Circle One Attached to form Donor will deliver by _____ Date _____ Arrange to pick up by _____ Date _____

DONOR INFO

Name of Donor/Business _____

Affiliation with Cosgriff: Circle One Corporation Friend Alumni Parent/ Past Parent Grandparent Faculty/Staff

Contact Person(s), if donor is a business _____ Phone _____

Address _____

City _____ State _____ Zip code _____

Phone _____ Cell _____ Email _____

The donor understands that the donation will be auctioned/given away by Cosgriff/St. Ambrose during their Annual Mardi Gras Fundraiser. The donor authorizes Cosgriff and its representatives to use, publish, televise, or otherwise distribute the name(s) shown below for donor recognition purposes:

Donor's Name for program listing _____ OR list as Anonymous _____

Donor Signature _____ Date _____

All of the proceeds from this event go to the programs we provide at J.E. Cosgriff Memorial Catholic School. We are a 501(c)(3) charitable organization #87-6112484. Please call 801-486-3197 if you have any questions.

Thank you for your donation!

SOLICITOR/ OFFICE USE ONLY:

Solicitor Name _____ Phone _____

Or Mail Response _____ Storage Location _____

White/Original: Cosgriff Office

Yellow Copy: With Item

Pink Copy: Donor