

Friends of Xavier Spring FUNdraiser Donation Form

Donor Details:

Please print information EXACTLY as you would like it to be listed.

	5	
Address:		
City:	State:	Zip:
Contact Person:		
	Phone:	
Website:		
Website: Please	Item Information	, . /.
Please	give complete description: Quantity, (Color, Size, etc.
i ui novers, piease include sear nui	mber, rows, sections, date. Include an n, especially if you are hosting a party	ig restrictions you would like placed of the
Item Name:		
Restrictions:		
Expiration Date:		
Estimated Fair Market Value	9	
	Stated value will be use	ed for tax purposes
Please complete and r	eturn this form with the item/	donation by April 5, 2020
· ·	of Xavier, 3642 University Blvd. #10	U
	o to Xavier Academy, 6203 Edloe	
Solicited by:	5,	. ,
5	indicate location here:	
If you do not have an actual item but	mand up to print a contificate for your	n denation places shark have

If you do not have an actual item but need us to print a certificate for your donation, please check here: ____