New Life Chri	stian School Bla	ck & 0	Green Gala	Annua	l Dinner	r & Auction			N	
	Donor Information									
Donor or Company Name (as it should appear in the catalog):		Donor 2 or Company Name (as it should appear in the catalog):								
Donor Contact Person (not listed in the catalog):			Donor 2 Contact Person (not listed in the catalog):				No	TAT	Lifo	
Donor Address (include City and Zip):		Donor 2 Address (include City and Zip):			New Life CHRISTIAN SCHOOL					
Donor Phone #:	Donor FAX #:		Donor 2 Phone#:				☐ Friday Flyer ☐ Auction Database			
Donor	Donor		Donor 2 Donor			Please send me an Invitation				
Email:	Website:		Email: Website:			to the auction.				
Solicitor	Solicitor		Donation Donor(s) Signature			Inature				
Name:	Phone #:		Date:		(Required):					
	Donated It	tem Info	rmation			Catalog I	Deadline:	3/1/2	016	
Catalog Item Name:				Item Value (f	fair mkt value)		Minimum B	id: I	Expiration Date:	
Detailed Item Description: (Quantity, Size, Color, Restrictions, or other information to ensure proper understanding of the donated item:)										
						Storage Location:				
☐ Tangible Item - Displayed at Auction ☐ Deliver			ry by Donor To be Picked			Jp by Solicitor				
							mittee to Provide Gift Certificate			
			to Provide Gift Certificate							
Item Label         Brief ItemName:         Donor's Name(s) as it should appear in the catalog:						Donor	Phone #:			

Item Laber	IC.		appear in the catalog.		
Tracking	Catalog	Code/	Package		
Number:	Number:	Category:	With:		
Please return forms to: New Life Christian School				Fed Tax ID	
Copy 1: Office			91-0587515		
2: Catalog/Database 3: Solicitor 4: Donor Receipt			Your Donation may be Tax Deductible. Check		
	(509) 754-5558	Fax: (509) 754-3540 E-Mail: 1	nlcs@nlcs.us	with your Tax Advisor.	

Copyright 2014 MaestroSoft, Inc. Form may be reproduced for organization's use.