



ST. FRANCIS XAVIER
A Jesuit Elementary School
Preschool - 8th Grade

Tracking No _____
 Type _____

GIFT DONATION AGREEMENT

Donation Description: _____

Restrictions: _____

Expiration Date: _____ Estimated Retail Value: _____

DONOR INFORMATION

Contact Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone/Email: _____

Yes No My name may be published as a donor to St. Francis Xavier

How your name should read in print: _____

ARRANGEMENTS

Solicited By: _____

Items Are Attached/Delivered. Item is donated to SFX for the purpose of raising funds through a variety of school events. It is understood that the school may use the donation where it may generate the most benefit.

Item Pickup to be Scheduled (phone number): _____

A monetary/cash donation has been made \$ _____

For your records, please note the St. Francis Xavier parish and school is a section 501(c)(3) organization to which contributions are eligible for a charitable deduction under section 170 of the Internal Revenue code of 1986, as amended. The IRS asks that we explicitly state: You received no goods or services in exchange for your contribution: St. Francis Tax ID #38-3792643.

Thank you for your generous donation!