



Item# _____
 Starting Bid \$ _____
 Bid Increase \$ _____

Our Lady of the Assumption School Auction
 2141 Walnut Avenue, Carmichael, CA 95608
 Attn: OLA Auction Solicitation Chair

Donor Information

(Please print your name and/or company the way you prefer it to be listed in the catalog)

Donor/Business Name: _____
Contact Person (full name): _____
StreetAddress: _____ **City:** _____ **Zip Code:** _____
Phone: (____) _____ **Fax:** _____
Email: _____ **Website address:** _____

Item Description

(Please include quantity, size, color, #of rooms, # of persons per night, price per item, etc.)

Restrictions:

Unless otherwise specified all donations are valid for 1 year from the auction date

Value of Donation \$

OLA Federal Tax ID #45-3954215

Cash Donation \$ _____ (check enclosed- payable to Our Lady of Assumption School) _____ (check if cash donation is for live auction)

Credit Card Donation: \$ _____ American Express, VISA, MasterCard (please circle)

Card # _____ Name as it appears on CC : _____

Expiration Date: _____ Signature and today's date: _____

Billing Address: _____ Daytime Phone Number: _____

Please Check all that apply:

Item/Certificate delivered w/form

Please arrange for pick-up of my item

I have enclosed brochure, photo or display materials

I will deliver item by (date) _____

Please prepare a certificate for my item

FOR OFFICE USE ONLY:

Date: _____ Category: _____ Location: _____ Photo: _____ Thank You: _____ Solicitor: _____