ST. HILARY SCHOOL PARENTS' ASSOCIATION	TRACKING #	CATEGORY	CATALOG #	
645 Moorfield Rd. Fairlawn, Ohio 44333 (330)867-8720	SOLICITOR NAME:		PHONE #	
ITEM DONATED:	VALUE: \$(REQUIRED)			
DONOR NAME:				
CONTACT PERSON: (if applicable) ADDRESS:				
CITY: STATE			u .	
DETAILED DESCRIPTION OF DONATION: EXPIRATION:		RESTRICTIONS:		
			INVENTORY	
			GC	
			T/Y	
	• 51		INPUT	
			DISPLAY	
ITEM DELIVERY INSTRUCTIONS:		RM INSTRUCTION	S:	
□ Donation, with form, turned in to inventory. □ Donation to be picked up at (location) by (person) on (date)	+C0	COMPLETE ONE FORM FOR EACH		
Donation to be delivered to school by (date)	USE ONLY			
Special Delivery Instructions:	♦AI	LL INFORMATION		
GIFT CERTIFICATE INSTRUCTIONS:		ST BE COMPLETE		
 Attached to form and turned in to inventory. Certificate to be delivered/or picked up (mark above for details). 	CE TH	IVED TO ST. HILAI E DATE BELOW TO CTION CATALOG	RY SCHOOL BY	
□ Please create certificate based on description (copy will be forwarded) 679	
On behalf of St. Hilary School, we	nis tax deductible donation	becomes the property of	St. Hilary School and is of-	

On behalf of St. Hilary School, we express our gratitude for your support of our annual fundraiser.

This tax deductible donation becomes the property of St. Hilary School and is offered for sale at an auction, the proceeds of which benefit the St. Hilary Catholic School. In accordance with Section 170 (f) (8) of the Internal Revenue Code, we herewith state that St. Hilary School did not provide any goods or services, in whole or in part, in exchange for, in consideration for your contribution of this donation.

White-input/master file

Yellow-work in progress

Pink-Donor (upon item receipt)

Please Return Completed Form to: Alexia Paterakis c/o Christopher Room 107 By February 28, 2014