

Richmond Academy
Triune Banquet and Silent Auction

DONATION RECEIPT

To donate more than one item, please use additional forms.

Individual Donor or Company Name: _____

Contact Person: _____

Address: _____

Phone Number: _____

Item Description (list as many details as possible i.e. size, color, expiration date, quantity): _____

Estimated Value of Item _____

Item is to be (check one):

_____ Picked up by (date) _____

_____ Delivered to Richmond Academy, 1900 West Main Street, Richmond

Cash Donation \$ _____

Donor Signature: _____ Date: _____

Donated items become property of Richmond Academy.

The donor should keep a copy of this contract. Richmond Academy will retain the original.

Please return to: Richmond Academy, PO Box 1094, Richmond, IN 47375-1094 or FAX to 765-966-8060.