



30516 South Coast Highway  
Laguna Beach CA 92651  
Tel: 949.494.7339 Fax: 949.376.5752  
www.saintcatherinelaguna.com

**Annual School Fundraiser  
Donation Form  
Tax ID# 95-2058566**

Description of Donation:

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Value: \$ \_\_\_\_\_ Valid From: \_\_\_\_\_ To: \_\_\_\_\_

Any Restrictions:

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If donation for travel or services, please tell us the procedure for scheduling:

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Donor Signature: \_\_\_\_\_

Donor Name (as you would like to be acknowledged): (please print)

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I/We would like to remain anonymous \_\_\_\_\_

Contact Name (if other than donor): \_\_\_\_\_

**Donor Contact Information:**

Address: \_\_\_\_\_

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Ph #: (\_\_\_\_) \_\_\_\_\_ Alt Ph #: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**SCHEDULED DONATION PICK UP / DELIVERY**

Donation enclosed/attached	Yes	No
Donor will deliver to school	Yes	No Date of delivery: _____
Volunteer will pick up item:	Yes	No Date of pick up: _____