



**Advancement Office**  
 1340 N. Acacia Avenue  
 Fullerton, CA 92831  
 714-879-6302  
 www.rosaryacademy.org

Item Number: ____	Date Received: ____
Solicited By: ____	Entered into RE: ____
Event: _____	Acknowledged: ____

## Donation Agreement

### DONOR INFORMATION

**Donor or Company Name** (as it should appear in publications): \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Rosary Alumna – if yes, graduation year:** \_\_\_\_\_

**Donor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### DONATED ITEM(S) DETAILS

**Detailed Description** (please include size, color, quantity, restrictions including dates available or expiration, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Item Value:** \_\_\_\_\_

### MONETARY DONATION

I/we will donate:  
 \$: \_\_\_\_\_

Please make checks payable to *Rosary Academy*.

Credit cards are accepted securely online for most events; please visit **www.rosaryacademy.org** or call the Advancement Office at 714-879-6302.

#### ITEM

- Item is attached
- Item will be delivered
- Item needs to be picked up

#### GIFT CERTIFICATE

- Gift certificate is attached
- Gift certificate to be provided
- Gift certificate needs to be created

#### VISUAL DISPLAY

- None needed
- Provided by donor
- Committee needs to create

### ITEM TRACKING INFORMATION

*For internal use only*

**Item Name:** \_\_\_\_\_

**Item Location:** \_\_\_\_\_ **Item Classification:**  Silent  
 Live  
 Opportunity Drawing  
 Other \_\_\_\_\_

**Notes:** \_\_\_\_\_

Please return this form and any items to:

Rosary Academy | Advancement Office | 1340 N. Acacia Avenue | Fullerton, CA 92831 | advancement@rosaryacademy.org

Rosary Academy gratefully acknowledges your generous support of our school.  
**For your records, our 501(c)(3) Tax Identification Number is 95-2419408**