



### Auction Item Donation Form

Your support of Connelly High School's Galaxy of Stars is greatly appreciated!  
Submit the item along with this form to the Development Office by **no later than** October 10, 2008.  
For questions, contact Margaret Nolde at (714) 330-1156.

Item Name \_\_\_\_\_ Item Value \$ \_\_\_\_\_

**Item Description**

(Please be as specific as possible. If possible, attach a brochure or photo of the item. For vacation packages, include location and detailed description of accommodations.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Item Restrictions**

(Dates available, expiration date, delivery limitations, age restrictions, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Is this item restricted to bidding by the Connelly community only? Yes \_\_\_\_\_ No \_\_\_\_\_

**DONOR Name** (As listed in program) \_\_\_\_\_

**Contact Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

Parent\_\_\_\_ Student\_\_\_\_ Alumna\_\_\_\_ Alumna Parent\_\_\_\_ Faculty\_\_\_\_ Staff\_\_\_\_ Friend\_\_\_\_

*Complete this section ONLY if you are submitting an item that you solicited from another donor.*

**SOLICITOR Name** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

Parent\_\_\_\_ Student\_\_\_\_ Alumna\_\_\_\_ Alumna Parent\_\_\_\_ Faculty\_\_\_\_ Staff\_\_\_\_ Friend\_\_\_\_

<i>For office use only</i>				
Date:	Ticket #:	Entered By:	Item Number:	Status: