![HFLogoHOR1[1]]()

For Office Use Only

**CATEGORY:**

**RECEIVED BY:**

**DATE:**

 **1527 Fremont Avenue, South Pasadena, CA 91030**

 **Tel: (626) 799-8908 Fax: (626) 799-0423 Tax ID# 95-1809567**

***www.holyfamily.org***

**AUCTION – PROCUREMENT FORM**

|  |
| --- |
| **Donor Name:**   |
| **Name and/or company name as you would like it to appear**  |

|  |  |
| --- | --- |
| **Contact:** | **Phone:** |

|  |
| --- |
| **Address:**  |

|  |
| --- |
| **Email:**  |

**PROCUREMENT ITEM** (**Please provide a very detailed description of the item and any special information)**

|  |
| --- |
| Item: **Description:**   |

|  |
| --- |
| **Restrictions:** (Date, expiration, ticket specifics (row seats) etc.) **Comments:**  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Item Status:**  | **Turned-In:** |  **To Be Delivered:** | **To Be Picked-Up:** |

**Donation: Credit Card: [ ]** VISA **[ ]** MASTERCARD **[ ]** Amex

|  |
| --- |
| **Name on Card:** |
| **Card #**  | Exp: |

**Donate Online:**

**Donation Check: Payable to: Holy Family Church**

|  |  |
| --- | --- |
| **Donor Signature:**  | **Date:**  |
| **Procurer Signature:**  | **Date:**  |