



Donation Card

(Keep this donation card with the donated money or auction item.)

Please mark one (X): Cash ___ Check ___ Auction Item: ___

Donation Amount \$ _____

Auction Item Description: _____

Suggested Value: _____

Please check if Donor is requesting a written receipt for their donation. If so, please provide the information below.

Donor Name: _____

Donor Address: _____

Phone: _____ Email: _____

Make checks payable to TCEF. TCEF is a 501(c)(3) organization. Your donation may be tax deductible to the extent allowed by the IRS. TCEF will acknowledge your donation with a written receipt if the box above is marked and contact information provided.

Donation made on behalf of:
Candidate
Name: _____
Grade
Level: _____



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