HMBHS GRAD NIGHT DONATION FORM

We appreciate your commitment to Support Grad Night for this year's Graduating Class at Half Moon Bay High School. We will send you a letter of confirmation including the estimated amount of your tax-deductible contribution for your records.

Donor Information (Complete below or attach business card)							
Individual	Business						
Individual or	r Business Name						
Address							
Mailing Add	ress						
Phone #Email							
Website							
Name (s) of Contact Person (s) (if business)							
					m or Service(including any restrictions		
				Retail Value	or Estimate		
Certificate:	Included with Form	None Needed	Grad Night to Create				
Item:	Included with Form	Donor to Deliver	Arrange for Pick-Up				
HMBHS Grad	l Night Contact Information						

HIVIBHS Grad Night Contact Information

Name: Dawn Novarina 650.438.7937

Email: hmbhs.gradnight@gmail.com Tax ID # 95-4826391

Mailing address: HMBHS Grad Night, PO Box 2401, El Granada, CA, 94018-2401

Notes to Donor:

- * Please include a brochure with this form for us to display with your item at the auction.
- For donations with a retail value of \$50 or more, we will be happy to make your business card available to our bidders. Please supply 10 business cards with this form.

Thank you for your contribution to the Grad Night Committee and for helping to keep our graduates safe.