

Procurement Form

Continuous Curriculum School ▪ 16924 E. Wellesley ▪ Spokane Valley, WA 99216 ▪ 509-927-9501

Please print clearly

Name of CCS Contact, if known: _____ Phone: _____

Donor Name as it should appear in catalog: _____

Donor Address: _____

Donor Contact, if a business: _____ Donor Phone: _____

Donor e-mail: _____

Estimated Value of the Donation: _____

Description of Donation: Please include any limitations or restrictions – catalog description will be created based on this information so please include as much information as possible.

Please Note: We often group donated items together to create themed baskets. This improves the marketability of individual items. In such cases, individual donors will receive recognition in the program in the same manner as they would if not grouped.

Please check here if we **MAY NOT** combine this donation with any other items.

For tangible items: Item turned in Please call to pick this up Item will be turned in by _____ (date)
*** Please remember, no alcohol can be delivered to the school. Please select the "pick this up" option and someone will be in contact with you.*

For services or certificates: Certificate attached Auction committee to create certificate as per description above