

Mercy High School 18th Annual



Sunday, April 10, 2022

ITEM DONATION FORM

Donor Name _____ *As it should appear on Printed Materials*

Contact _____

If Alumna, Maiden Name & Grad Year: _____

Address _____

City _____ State _____ Zip _____

Email _____ Cell Phone (____) _____

Item Name: _____ Estimated Value \$ _____

Description:

Expiration Date (If Applicable): _____

Special Instructions? Anything else we should know?

Items must be received by **March 31st**

THANK YOU FOR YOUR GENEROUS SUPPORT!

Mercy Alumnae Office | mhsmi.org/tea | alumnaeoffice@mhsmi.org | 248-476-3270 | Tax ID 38-2501739