Catholic Woman's Club
of Pierce County

Procurement Form

Tax ID #: 91-6054566

Donation Item Information

Item name: _____

Item Description (Please describe in detail and include any restrictions):

_____

_____

_____

_____

Donor Stated Value: $_____Expiration Date (if applicable): _____

Donor Information

Donor & or Company Name: _____

Contact Person (if different from Donor): _____

Donor/Company Address: _____

Donor/Company Ph#: _____ **Email:** _____

Donor Signature: _____ **Date:** _____

Thank you for your generosity!

Please retain the pink copy for your company records & return the white copy to CWC