



**HINGHAM HIGH SCHOOL ROWING ASSOCIATION (HHSRA)
DONATION CONTRACT**

Name of Company (Donor): _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Phone and / or Email: _____

HHSRA Signature: _____

ITEM INFORMATION:

_____ Donor Wishes to Remain Anonymous

_____ Display Material Available

_____ Gift Certificate Received

_____ Gift Certificate To Be Picked Up

_____ Item Received

_____ Item To Be Picked Up

ITEM DESCRIPTION:

APPROXIMATE VALUE: \$ _____ **EXPIRATION (IF ANY):** _____

PICK-UP DATE: _____ **EXCHANGABLE? (YES / NO):** _____

Donations may be tax deductible. Please consult your tax advisor. Hingham High School Rowing Association did not provide you with any goods or services in whole or part for consideration of your gift. Your contract copy is your receipt for tax purposes.

501 (c) (3) Organization - **Tax ID: 412219809.** HHSRA, PO Box 453, Hingham, MA 02043.