

Christ the King Parish School

425 West 85th Street

Kansas City, MO 64114

Phone: 816-363-1113

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Donation Information Sheet

Item: _____

Description: _____

Value: \$ _____

Purpose of Donation: _____

Donated By: _____

Business: _____

Contact Name: _____

Address: _____

Address: _____

Phone Number: _____

For Internal use only CPTA
Procurement Number: _____
Catalog Number: _____
Date Received: _____
CKS Family: _____
Tax letter date: _____
Completion Date & Initials: _____