

Xavier-SGO Donation Form

Please complete this form and include it with your check. **Checks should be made out to Xavier-SGO and mailed to:**

Xavier-SGO
600 W North Bend Rd
Cincinnati OH 45224

First Name: _____

Last Name: _____

Address: _____

Address 2: _____

City: _____

State: _____

ZIP: _____

E-mail address: _____

Phone: _____

Phone Type: _____

Affiliation (please mark all that apply):

Alumnus

Current Parent

Parent of Alumni

Grandparent

Faculty/Staff

Friend

Other

Recipient of Donation (please mark one):

SGO – St. Xavier High School

SGO – Xavier Jesuit Academy

SGO – Greater Need

Tax year for which your donation is made? _____

New in tax year 2023, the credit may also be claimed for donations made on or before the unextended return due date, but the same contribution cannot be used to claim the credit in two tax years.

If you file taxes jointly, please provide the full name of the person with whom you file:

First Name: _____

Middle Name: _____

Last Name: _____