

DONATION ACCEPTANCE FORM

NAME OF DONOR:				
STREET ADDRESS:				
CITY, STATE & ZIP:				
TELEPHONE:				
DESCRIPTION OF THE DONATION: (Inc	clude a detailed description	of each item (serial number, color,		
etc.) Cash Amount: \$ Items (with detailed description):	Check: #	Amount: \$		
DONOR'S ESTIMATE OF VALUE: \$ _ PURPOSE OF THE DONATION: (ASB orga for a club or organization that is part of a schoo deposit the cash or check into the ASB bank acc	l's ASB, indicate the name	of the club or organization and		
If the donation is for the District, either for the forward the cash or check to Crystal Guimon below whether the donation is for a specific class	nd in Business Services al	ong with this form. Explain		
RECEIVED AT:				
RECEIVED BY:				
Please note donations made to the district are sent to the Superintendent's Office. Donations made to A should be sent by the ASB. If you would like assis CLUB OFFICER (if applicable)	SB must be accepted by the studestance in sending this letter, pleas	ent council. Letters of appreciation		
Signature	Signature	Signature		
Date ASB ADVISOR (if applicable)	PRIN	Date CIPAL OR DESIGNEE		
Signature	Signature			
Date		Date		