

Section A: Description of Gift

Department/Campus _____ Date _____

Organization/Club receiving gift _____

Nature of Gift: Money \$ _____

Supplies \$ _____ (Determined by Donor)

Furniture/Equipment \$ _____ (Determined by Donor)

Cost to district (maintenance, upgrade, etc.) \$ _____

Description of Gift _____

Where and how will this gift be used? _____

Section B: Donor Information

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Section C: Inventory/Fixed Asset Information

(Completed only if furniture/equipment)

The Inventory/Fixed Asset Coordinator for the Department/Campus is responsible for tagging any fixed assets, if applicable:

Inventory/Fixed Asset Barcode _____

Board Approval _____ Date _____

Inventory/Fixed Asset Coordinator Signature (Only for furniture/equipment) _____ Date _____

Principal/Director Signature _____ Date _____

Assistant Superintendent for Administration Signature _____ Date _____