

Issaquah School District Request for Acceptance of Gifts

Please see Policy 6114 and Procedures 6114P on Gifts and Memorials for procedure to donate gifts

Form 6114-F2

Gifts \$2500 or More in Value

School/Location _____

Name of Donor(s) _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

GIFT:

Money \$ _____ for use by _____ program.

Money \$ _____ for Equipment/Material

(Gifts for the purchase of Material/Equipment must include cost of installation by licensed Contractor or agreement by Maintenance Department to provide installation)

Other donated items _____

General Fund

ASB Fund ASB Budget Number# _____

Please describe the purpose of the gift if accepted _____

APPROVAL(S):

Principal/Program Manager Approval: _____ Date: _____

(Required for all donations)

District Administration Approval: _____ Date: _____

(Required for all donations)

Technology Approval _____ Date: _____

(Required for all donations of computers, printers and software to comply with District Standards)

Capital Projects Approval _____ Date: _____

(Required for all donations that require installation and/or maintenance of material/equipment on District property)

Facilities/Maintenance Approval _____ Date: _____

(Required for all donations that require installation and/or maintenance of material/equipment on District property)

Board Approval Date: _____

(Thank you Acknowledgment will be sent to donor from the School Board)

Please submit NCR form COMPLETELY INTACT with CHECK/CASH to the Accounting Office

Accounting Use Only:

Budget # _____ Accepted by: _____ Date: _____

Distribution: **Yellow Copy will be returned to school/program after processing**