

WEST VALLEY SCHOOL DISTRICT
Receipt of Donations

Date: _____

Donor: _____

Address: _____

Phone #: _____

Donation made to: _____

Purpose: _____

Donated Item(s): _____

Amount/Value of Items Donated: _____
(Values of donated items must be approved by the Business Office)

District Revenue Account Code: _____ **(attach copy of District receipt-money only)**

Received By (Employee)

Date

Supervisor

Assistant Superintendent

Send the completed form to Angela at the Central Office.

As per Board Policy No. 6114 the Board of Directors must approve all donations prior to receipt of funds and/or property.