



Perris Union High School District

Donation Acceptance Form

NAME OF DONOR: _____

STREET ADDRESS: _____

CITY, STATE & ZIP: _____

TELEPHONE: _____

DESCRIPTION OF THE DONATION: *(If cash or check, show the exact amount; if other than cash or check, include a detailed description of each item, including serial number, color, etc.)*

DONOR'S ESTIMATE OF VALUE: \$ _____

PURPOSE OF THE DONATION *(ASB organization, school site, or District program.)* If the donation is for a club or organization that is part of a school's ASB, indicate the name of the club or organization and deposit the cash or check into the ASB bank account. **Retain this form as a record of the donation.**

If the donation is for the District, either for the use of the school or for another district program; forward the cash or check to Sylvia Hinojosa in Business Services along with this form. *Explain below whether the donation is for a specific class or program at a school site or a specific District program.*

RECEIVED AT: _____

RECEIVED BY: _____

Please note donations made to the district are sent to Board for approval and letters of appreciation are sent to the donor by the Superintendent's Office. Donations made to ASB must be accepted by the student council. Letters of appreciation should be sent by the ASB.

PERSON RECEIVING DONATION

PRINCIPAL OR DESIGNEE

Signature

Date

Signature

Date