



District Donation Form Gifts, Grants, and Bequests

- ☐ This is a grant.
☒ This is a donation.
☐ I wish to remain anonymous.

Today's Date: 8/20/25

Donor's Name: Cowlee Cards and Gaming

Donor's Address: 2205 Grand Ave.
Wausau, WI 54403

Donor's Phone: —

Amount of Donation: —

School/Building Receiving Donation: All schools

Department/Program Receiving Donation: _____

Designation/Purpose of Donation: School supplies, students in need.

The Wausau School District and staff
Department/Program

of WSD gratefully acknowledge your gift of school supplies
School/Building Donation

to be used by the Department/Program named above for students in need
Purpose

Building Principal Signature: [Signature] Date: 8/20/2025

ROUTING:
Original to Donor
Email copy to Department/Program
Email copy to Building Administrative Assistant/Building Bookkeeper
Email copy to Superintendent's Administrative Assistant at Longfellow



District Donation Form Gifts, Grants, and Bequests

Today's Date: 8/22/25

- ☐ This is a grant.
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Donor's Name: New Hope Community Church

Donor's Address: 229375 County Road J
Wausau, WI 54403

Donor's Phone: _____

Amount of Donation: \$400.00

School/Building Receiving Donation: District Nutrition Services

Department/Program Receiving Donation: Nutrition Services

Designation/Purpose of Donation: Help go toward school lunch debt.

The Wausau School District and School Nutrition Services

Department/Program

of the District

gratefully acknowledge your gift of

\$400.00

School/Building

Donation

to be used by the Department/Program named above for school lunch debt.

Purpose

Building Principal Signature: Karen Fuchs

Date: 8/22/25

ROUTING:

- Original to Donor
- Email copy to Department/Program
- Email copy to Building Administrative Assistant/Building Bookkeeper
- Email copy to Superintendent's Administrative Assistant at Longfellow



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Today's Date: 9-3-25

Donor's Name: North Central Wisconsin Indivisible

Donor's Address: NA

Donor's Phone: 208-230-4448

Amount of Donation: \$50

School/Building Receiving Donation: All schools

Department/Program Receiving Donation: _____

Designation/Purpose of Donation: School supplies for students in need.

The Wausau School District and staff
Department/Program

of all schools gratefully acknowledge your gift of school supplies
School/Building Donation

to be used by the Department/Program named above for students in need.
Purpose

Building Principal Signature: [Signature] Date: 9/4/2025

ROUTING:
Original to Donor
Email copy to Department/Program
Email copy to Building Administrative Assistant/Building Bookkeeper
Email copy to Superintendent's Administrative Assistant at Longfellow



District Donation Form Gifts, Grants, and Bequests

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Today's Date: August 20, 2025

Donor's Name: Delta Dental

Donor's Address: PO Box 86

Stevens Point, WI 54481

Donor's Phone: _____

Amount of Donation: _____

School/Building Receiving Donation: Horace Mann

Department/Program Receiving Donation: Eagle Pride Market

Designation/Purpose of Donation: Toothbrushes for hygiene bags

The Wausau School District and Eagle Pride Market
Department/Program

of Horace Mann gratefully acknowledge your gift of Toothbrushes
School/Building Donation

to be used by the Department/Program named above for Student hygiene bags
Purpose

Building Principal Signature: [Signature] Date: 8/19/25

ROUTING:
Original to Donor
Email copy to Department/Program
Email copy to Building Administrative Assistant/Building Bookkeeper
Email copy to Superintendent's Administrative Assistant at Longfellow