

# Gift Acceptance Form

Date 12/21/22

Donation to school/location BRAVO - Brooks Middle School

Detailed description of the gift  
Donation dollars used to support the BRAVO Performing Arts Program

Estimated/actual gift value \$500.00

Intended use  
To support BRAVO Programming including stipends, scholarships, office supplies, theatrical materials, microphones and LED Lighting for the auditorium grid and theatrical productions.

How will the gift impact the district? Please check the following items that apply and provide a brief description of the impact the gift will have on the district.

- Professional development or staff training
- Equity across all schools
- Installation and/or construction work
- District-curriculum
- Coordination of scheduling work
- Ongoing maintenance/replacement
- District and/or school computer network
- Ongoing financial or staff support
- Hire additional staff
- Other

The contribution from parents aides the BRAVO program to continue providing a diverse program of performing arts opportunities inclusive to all Brooks students, including after school clubs, musicals, plays and workshops that are free to all students.

Outside vendor required? Yes  No

District performing the work? Yes  No

Donation timeline N/A

Donor (name and address) Joan Gonzalez  
931 Home Ave.  
Oak Park, IL 60304

Principal/Administrator Signature Date  
Tina Reynolds 12/21/22

Principal/Administrator – Please use the space below to provide your reason/rationale for either approving or denying the proposed donation.

All donations and contributions help support the robust BRAVO programming that is offered free to all Brooks students.

### For Internal Use Only

Superintendent Approval Yes No  
Board Approval Needed Yes No  
Work Session Agenda Date \_\_\_\_\_  
Board Approval Date \_\_\_\_\_  
Donor Notification Date \_\_\_\_\_  
Superintendent Signature Date \_\_\_\_\_

Administrator Signature Date (if applicable) \_\_\_\_\_

# Gift Acceptance Form

Date 12/21/22

Donation to school/location BRAVO - Brooks Middle School

Detailed description of the gift  
Donation dollars used to support the BRAVO Performing Arts Program

Estimated/actual gift value \$1,000.00

Intended use  
To support BRAVO Programming including stipends, scholarships, office supplies, theatrical materials, microphones and LED Lighting for the auditorium grid and theatrical productions.

How will the gift impact the district? Please check the following items that apply and provide a brief description of the impact the gift will have on the district.

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Outside vendor required? Yes  No

District performing the work? Yes  No

Donation timeline  
N/A

Donor (name and address) Lisa Kiker  
702 N. Elmwood Ave.  
Oak Park, IL 60302

Principal/Administrator Signature Date  
Tina Reynolds 12/21/22

Principal/Administrator – Please use the space below to provide your reason/rationale for either approving or denying the proposed donation.  
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## For Internal Use Only

Superintendent Approval Yes No  
Board Approval Needed Yes No  
Work Session Agenda Date \_\_\_\_\_  
Board Approval Date \_\_\_\_\_  
Donor Notification Date \_\_\_\_\_  
Superintendent Signature Date \_\_\_\_\_

Administrator Signature Date (if applicable) \_\_\_\_\_

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Outside vendor required? Yes  No

District performing the work? Yes  No

Donation timeline  
N/A

Donor (name and address) Andrew Pauline  
223 N. Marion St.  
Oak Park, IL 60302

Principal/Administrator Signature Date  
Tina Reynolds 12/21/22

Principal/Administrator – Please use the space below to provide your reason/rationale for either approving or denying the proposed donation.  
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### For Internal Use Only

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Board Approval Needed Yes No  
Work Session Agenda Date \_\_\_\_\_  
Board Approval Date \_\_\_\_\_  
Donor Notification Date \_\_\_\_\_  
Superintendent Signature Date \_\_\_\_\_

Administrator Signature Date (if applicable) \_\_\_\_\_

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Outside vendor required? Yes  No

District performing the work? Yes  No

Donation timeline  
N/A

Donor (name and address) Karen Terio  
38 Le Moyne Pkwy  
Oak Park, IL 60302

Principal/Administrator Signature Date  
Tina Reynolds 12/21/22

Principal/Administrator – Please use the space below to provide your reason/rationale for either approving or denying the proposed donation.  
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## For Internal Use Only

- Superintendent Approval Yes No
- Board Approval Needed Yes No
- Work Session Agenda Date \_\_\_\_\_
- Board Approval Date \_\_\_\_\_
- Donor Notification Date \_\_\_\_\_
- Superintendent Signature Date \_\_\_\_\_

Administrator Signature Date (if applicable) \_\_\_\_\_