

RECEIVED

DEC 03 2018

DONATION FORM

PALESTINE I.S.D.  
SUPERINTENDENT'S OFFICE

On behalf of PHS Athletics (campus/department), I am asking that you approve the acceptance of the following items, which are being donated by:

Donor name PALESTINE BOOSTER CLUB

Address P.O. Box 1865  
PALESTINE, TX 75801

Date 11-15-18

| Item(s) Donated | Value      |
|-----------------|------------|
| ① CK 1081       | \$ 945.00  |
| ② CK 1082       | 1546.00    |
| TOTAL           | \$ 2491.00 |

Purpose of the donation (specific use, if any):

- ① Supplement girls soccer program  
② Supplement boys soccer program

Signature of Donor

*[Signature]*

Campus/Department Administrator Signature

*Jason Marshall*

Superintendent Signature

Date

11-26-18

Date

12/12/2018

Date