



Donation (Cash / Property) to the Madison Public Schools

Completion of this form is required prior to the district's consideration of a proposed donation to the Madison Public Schools. This form is to be completed in its entirety and submitted to the building principal / assistant principal, Athletic Director, or Superintendent prior to receipt of any donated goods, services, or funds. The school principal may approve gifts to a school that are valued at \$500 to \$1,000 and meet criteria established by the administrative regulations established in accordance with this policy. Donations valued in excess of \$1,000 must be approved by the Board of Education. (Reference Policy #3281)

Date Form Completed: 12/3/25

Organization / Individual Making Donation: Lawrence J. Gage Living Trust

Address: 5 Brenda Lane Old Saybrook CT 06475
(Street, city, zip)

Phone #: 2038898372

Description of Donation / Gift and intended use: support the music programs at Hand

Approximate Value: \$12,500

Recipient(s) name: Hand Music Boosters

Acknowledgements: (optional)

In honor/memory of: Lawrence J. Gage

Acknowledgement Contact: John Gage

Acknowledgement Address: see above

This request cannot be acted up on before the building Principal / Assistant Principal, Athletic Director, or Superintendent has been consulted concerning this gift. Please provide the name/signature of the person who was consulted.

Signature of Person Consulted: [Signature]

Are there conditions of use attached to the gift/donation: ☒ Yes ☐ No

If yes, please explain conditions: intended to support the Hand music program with the approval os TJ Salutan and John Gage

Are there installation, site preparation, labor, or equipment costs needed for installation, etc.? ☐ Yes ☒ No
If yes, who is responsible for the costs? _____

What is the annual maintenance cost of the donation, if any? ☐ Yes ☒ No
Are there any other additional costs to the District? ☐ Yes ☒ No

[Signature]
(Signature of Donor)

For Central Office Use Only

Accepted by Superintendent: [Signature]
Signature

12/3/25
Date

Accepted by Board of Education on: _____
Date



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Organization / Individual Making Donation: Lawrence J. Gage Living Trust

Address: 5 Brenda Lane Old Saybrook CT 06475
(Street, city, zip)

Phone #: 2038898372

Description of Donation / Gift and intended use: support the Hand Girls Tennis program

Approximate Value: \$12,500

Recipient(s) name: Hand Tennis Boosters

Acknowledgements: (optional)

In honor/memory of: Lawrence J. Gage

Acknowledgement Contact: John Gage

Acknowledgement Address: see above

This request cannot be acted up on before the building Principal / Assistant Principal, Athletic Director, or Superintendent has been consulted concerning this gift. Please provide the name/signature of the person who was consulted.

Signature of Person Consulted: [Signature]

Are there conditions of use attached to the gift/donation: ☒ Yes ☐ No

If yes, please explain conditions: intended to support the Hand Girls Tennis program with the approval of TJ Salutari and John Gage

Are there installation, site preparation, labor, or equipment costs needed for installation, etc.? ☐ Yes ☒ No
If yes, who is responsible for the costs? _____

What is the annual maintenance cost of the donation, if any? ☐ Yes ☒ No

Are there any other additional costs to the District? ☐ Yes ☒ No

[Signature]
(Signature of Donor)

Accepted by Superintendent: [Signature]
Signature

12/3/25
Date

Accepted by Board of Education on: _____
Date