

HOPE - HAPPINESS - SUCCESS
BAGOSENDAM - MINWAANIGOZI - GASHKITOON

DEER RIVER HIGH SCHOOL 101 First Avenue NE PO Box 307 Deer River, MN 56636 Home of the Warriors KING ELEMENTARY SCHOOL 504 5th St. SE PO Box 307 Deer River, MN 56636 King Pride

Policy 706 Appendix A

DONATION RECEIPT FORM

Please complete the following, sign & return to the building principal or superintendent. Superintendent will

present to the Deer River Board of Ed	ucation for appr	roval. Keep a copy for	the site (Elementa	ary or Secondary)
DEER RIVER STAFF NAME: (Person receiving donation) JOB/POSITION: Admin.	Amy C 1 (plea	hung se print)	DATE	=: 2/21/25
JOB/POSITION: Admin. A	ssistant	BUILDIN	G: DRHS	
DONATION RECEIVED FROM	M: America (Orga	an Legion Post nization of Individual	122	
Does donor prefer to remain anonymo				
Amount of Donatio		OO Cash		
FIN	IANCIAL DON	ATION		
Amount of Donatio	n: \$	Cash	_Check#	
Intended purpose:				
Employee Signature	2/21/05 Date	Principal Signature		Date
Superintendent Signature	Date	Board Rep. Signatu	re	Date

Disclaimer: Once accepted, a gift shall be the property of the School District unless otherwise provided in agreed upon terms.



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DEER RIVER STAFF NAME (Person receiving donation)		* /		2/19/25			
OB/POSITION: Admin Assistant BUILDING: DRHS							
DONATION RECEIVED FR	OM: <u>Bows</u> (Orga	atring Store unization or Individual)					
Does donor prefer to remain anony	mous: YES	_ NO_X					
		CashC		-			
F	INANCIAL DON	IATION					
Amount of Donat	ion: \$	Cash C	heck#	_			
Intended purpose:							
Employee Signature	2/19/25 Date	Principal Signature		Date			
Superintendent Signature	Date	Board Rep. Signature		Date			

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Date

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Superintendent Signature

DONATION RECEIPT FORM

Please complete the following, sign & return to the building principal or superintendent. Superintendent will present to the Deer River Board of Education for approval. Keep a copy for the site (Elementary or Secondary) records. ____ DATE: 2/27/25 DEER RIVER STAFF NAME: (Person receiving donation) BUILDING: TKHS JOB/POSITION: \ DONATION RECEIVED FROM: (Organization or Individual) NO YES Does donor prefer to remain anonymous: **FINANCIAL DONATION** Amount of Donation: \$ 500.00 Cash Check# 386090 Intended purpose: **FINANCIAL DONATION** Amount of Donation: \$_____ Cash Check# Intended purpose: Principal Signature Date

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Date

Board Rep. Signature