



## Donations and/or Gifts

(solicited donations must be approved prior to contacting Donors)

Student Group/Employee receiving donation: Football - HS

Sponsor: Veager

Donor:

Name: \_\_\_\_\_ (Do Not read or list)  
Address: \_\_\_\_\_ wishes to remain anonymous

Phone: 830-456-9056

Email Address: \_\_\_\_\_

### Donated items:

List item(s) donated: \_\_\_\_\_

Value of donated items: \_\_\_\_\_

How will these items be used? \_\_\_\_\_

### Donated Monetary amount:

How much was donated: \$ 600

Intended use of monetary donation: Pre-Game Meals to be used

How will the funds be used? \_\_\_\_\_ for playoffs.  
Eug

Is this donation expressly made conditional upon the District's use for a specified purpose? If yes, please explain: Pre-Game Meals - HS Football

Reviewed by:

[Signature]  
Principal Date: \_\_\_\_\_

Approved (per CDC(LOCAL)-A):

[Signature]  
Superintendent Date: \_\_\_\_\_

If conditional, board approval is required: Board Approved date: \_\_\_\_/\_\_\_\_/\_\_\_\_