McCall-Donnelly Jt. School District #421

Gifts, Grants, Donation and Bequests Approval Form

Requests for gifts, grants and bequests shall be submitted to the District Office for Board approval prior to applying for any awards. They must satisfy the criteria below and meet the requirements of Board Policy 7260.

Gifts, grants, donation or bequests with a value in excess of \$2,000 shall be subject to approval by the board.

Gifts, grants, donation or bequests with a value greater than \$500 but less than or equal to \$2,000 shall be subject to approval by the superintendent or designee.

Gifts, grants, donations or bequests with a value of \$500 or less shall be approved by the supervising administrator or director.

Gifts, Grants, Donation and Bequest Criteria

To be acceptable, a gift, grant or bequest must satisfy the following criteria:

- 1. The Board would be willing to continue the program when the donated funds are exhausted.
- 2. There will be no undesirable or hidden costs.
- 3. The award will be appropriate and safe for students.
- 4. The gift, grant and/or bequest will not conflict with any provision of the Board policy or public law.
- 5. The gift, grant and/or bequest will have a purpose consistent with those of the District.

Melissa Maini Applicant Name A/14/25 Date Requested
Donnelly Elementary School Name
Enrichment Title of Grant, Gift, Donation or Bequest
Donnelly LOT tox grant (city of Donnelly) Source of Grant
Date:
Superintendent or Administrator Signature
Please attach a copy of the grant application or a description of the grant, gift or bequest,
Date Received
Board Chair Signature Date

Received	#



CITY OF DONNELLY LOCAL OPTION TAX "LOT" FUNDING APPLICATION FY26

Due Date: April 14th, 2025

Applications will only be accepted by email: lclemens@cityofdonnelly.org
Failure to submit a completed application could result in the application not receiving funding.

Applicant: Donnelly Elementary
Mailing Address: P.O. Box 369
City: Donnelly State: Idaho Zip Code: 83615
Contact Name: Melissa Maini Title: Educator
Phone: 208-325-4433 Email: wdavenport@mdsd.0
If allocation is granted, make check payable to: Donnelly Elementary
Organization Type: Circle One for Profit Non-Profit Governmental Entity
Other: (include proof authorized to conduct business in Idaho)
Project Name: Enrichment
Amount Requested: \$12,395.
Proposed Project Start Date: 10/1/25 Proposed Completion Date: 6/4/26
(Start dates must fall with the forthcoming Fiscal Year which begins October 1st)
Current Sources of Funding: donations
Copies must be submitted: W-9 Form Proof of State of Idaho Business Entity Registration (to apply, contact the Secretary of State's Office at 208-334-2301. For proof of registration, go to www.accessidaho.org) 1 year Profit and Loss Statement and Balance Sheet
This Request fall under the qualifying category of (3.10.050 Purpose of Tax Revenues)
Circle One:
A. New paving, parking, bike paths, public transit and transportation;

B. Matching funds to leverage grant funding;

D. Parks and land acquisition for new park facilities;

C. Public safety;

 E. City beautification including but not limited to, open space acquisition, streetscapes, burial of overhead utility lines; F. Recreational and cultural activities and facilities including, but not limited to, library, community art and cultural events; G. Animal shelter support; H. Economic Growth, marketing, advertising, promotion and development; I. Capital Improvements; and J. Direct costs to collect and enforce the tax.
Explain in detail how this request complies with the public purpose/s you have identified:
The activities for school wide enrichment
directly assist the students at Donnelly
Elementary.
Funds will be specifically spent as follows (attach additional page, if needed, to describe project): Field trips to learn to ski at Tamarck, Idaho Historical Museum, Idaho penitentiary, Ice Skating, theater, Kindergarten family dinner, 5th grade Camp, Read-A-Thon, Science Night, Incentives.
Process for Receiving Allocated Funds:
 Allocated Funds Upfront – sign Agreement then complete Final Award Report upon completion of project.
 Reimbursement of Allocated Funds – show project receipts and completed Final Award Report.
All Ads/Communication to include mention of funding by City of Donnelly Local Option Tax
I certify that the information herein contained and attached is true and correct on behalf of the requestor:
Submitted by: Melissa Maini Date: 4/4/25 Signature: Date: 4/4/25
Signature: Me:

Received _____#___