

## ARANSAS PASS INDEPENDENT SCHOOL DISTRICT DONATION ACCEPTANCE FORM

Donor Information				
Donor				
Name/Organization:				
Donor Address:				
Donor Phone				
Number:				

Donation Information				
Date Donated:				
Group/Campus				
Receiving				
Donation:				
Value of Donation:				
	Donation Type: Monetary Equipment/materials			
For donations of equipment/materials, please provide a description of the items				
donated (including model number, serial number, brand, etc.).				
Intended use or purpose of donation (if applicable):				

Per APISD Board Policy CDC (Local) the Board delegates to the Superintendent the authority to accept unsolicited gifts on behalf of the District. However, any gift that the potential donor has expressly made conditional upon the District's use for a specified purpose, or any gift of real property, shall require Board approval. Any donation accepted by the district becomes the sole property of the district.

Signatures and Approval					
	Signature	Date	Approved/Denied		
Principal/Director					
Superintendent					
Board of Trustees					