

SCHOOL DISTRICT OF RHINELANDER

MEMORANDUM

To: Kelli T. Jacobi, Superintendent of Schools
From (staff member name): _____
School Building: _____
Date: _____
Re: Gift/Donation Acceptance

Gift/Donation Description (please be specific – indicate cash donation or description of the item(s) donated and what the intended use of the gift/donation is for):

Cash Amount \$ _____ or (item description) _____

Intended Use of Gift/Donation: _____

Approximate Value (if not a monetary donation): \$ _____

Monetary donation has been received by the Business Office for deposit: (monetary donations must be submitted to the Business Office for deposit prior to School Board acceptance)

_____ Yes _____ No

Gift/Donation Given By (indicate the name of the contact person, as well as the name of the business/organization):

Address (indicate a complete address – Street/P.O. Box, City, State, Zip): _____

Does this gift have educational value (explain)? _____

What is the appropriateness of this gift (explain)? _____

Will this gift/donation cause any additional costs to the District? _____
If yes, please explain: _____

RESOLVED that the Board of Education of the School District of Rhinelanders accept, with sincere appreciation, the following gift(s)/donation(s):

