



MONETARY DONATION AGREEMENT

(NAME OF DONOR) _____

hereby gives (NAME OF BUILDING OR DEPARTMENT) _____

a monetary donation in the amount of \$ _____ (CHECK #) _____

This donation is for the purpose of: _____

Revenue account code:

| | | | | |
|--------------|---------------------------------|--|------------------------------|--|
| Reviewed by: | <i>Assistant Superintendent</i> | | <i>Accounting Department</i> | |
|--------------|---------------------------------|--|------------------------------|--|

| DONOR'S INFORMATION |
|----------------------|
| Name of Organization |
| Address |
| City, State, Zip |
| Title |
| Name (Please Print) |
| Signature |

| SOUTH KITSAP SCHOOL DISTRICT'S INFORMATION |
|--|
| Principal's, Director's, or Designee's Signature |
| Date |
| BOARD ACTION INFORMATION |
| *Date of Board Meeting |
| <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED |
| Signature of Secretary to the Board/Superintendent |

****Please submit this completed form to the SUPERINTENDENT'S OFFICE for Board action.**