

LIVE OAK UNIFIED SCHOOL DISTRICT  
2201 Pennington Road, Live Oak, CA 95953

GIFT AND/OR DONATION TO ASB

Prospective donors of a gift or donation in excess of \$100 are required to outline in advance the intent of the gift or donation and to specify any particular preferences as to its uses. The purpose of this preliminary review procedure is to determine the appropriateness of the gift or donation and to document the intent of the donor.

**Name of School** \_\_\_\_\_

**Name of Club/Organization** \_\_\_\_\_

**Fiscal Year** \_\_\_\_\_

**Name of Donor** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City, State, ZIP** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Description of donation:** *If cash/check, include exact amount; if other, include a detailed description of each item, including serial number, color, etc.*

\_\_\_\_\_  
\_\_\_\_\_

**Donor's estimate of value** \_\_\_\_\_

**Description of Purpose**

*Funds are to be deposited into the ASB bank account. Retain this form as a record of the donation.*

\_\_\_\_\_  
\_\_\_\_\_

**Donor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

<i>FOR OFFICE USE ONLY</i>	Signature/Title
Student Representative	_____
Club/Organization Advisor	_____
School Administrator	_____
<b>ASB Approval Date:</b>	_____
CFO Signature	_____
Superintendent Signature	_____
Board President Signature	_____
<b>Board Approval Date:</b>	_____