



## Donation Resolution Request Form

To: Allison Murray

Business Services

From/Site: \_\_\_\_\_

Date: \_\_\_\_\_

Please initiate requirements for a School Board Resolution to accept the donation of the following item(s):

Asset Donation Received From:	Asset Donation Received From:
Name:	Name:
Address:	Address:
Asset Description:	Cash Amount:
Serial Number:	Program Account Number:
Model Number:	Donation is for:
Brand:	Deposit Slip to Accounting

Value: (Use Suggested Value) \$ \_\_\_\_\_

Purchasing Established Value: \$ \_\_\_\_\_

<u>Purchasing Only</u>	<u>Accounting Only</u>
Inventory Tag Number: _____	Received: _____
Added to Asset Inventory: _____	