Donation Approval Request

All donations must be approved by the Board of Education at a regularly-scheduled Board Meeting in accordance with Board Policy 7230. After approval all donations become the property of the Big Walnut School Board.

Please fill this form out as completely as possible and forward to the Treasurer's Office.

All monetary donations must be deposited within three (3) business days if under \$1,000.00 and within twenty-four (24) hours if over \$1,000.00.

Submitted By:	Stephanie Cooper Date: 5/25/16
Building/Department:	For HSE
Donor Name:	Target - Red Card
Donor Address:	
_	
Donation Description:	\$25.00
Donation Value:	
Account Type:	HSE Principals Fund
Principal/Supervisor Approval:	Stephane Coope Date: 5/25/16
-	
	For Office Use Only
Fund/SPCC:	018-9003 Account Name: HSE Princ Fund

Copy: Supterintendent's Office

TO:	Treasurer's	Office					
1.	DONATION City	N TO: S Challe Name Address State	enge Day	2.	DONATION FROM: Name PO SOA Sunbury Of City State	<u>102</u> 89	<u>UVU</u> 43074 Zip
3.	DESCRIPT	TION OF DONAT	rion(s)		Contact Person		Phone
4. 5. 6.		F DONATION N PROCESSED Approval)	\$_\loo\\u00000 THROUGH	_	ARD FUNDS		IVITY FUNDS S-17-16 (Date)
			TREASURER'S (OFFIC	CE USE ONLY		
(Sup	perintendent's	s Approval)		_	(Date)		(Agenda Date)
	200 - 9:		S Challenge:	Dou	(Date)		
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TO:	Treasurer's	Office			
1.	777	NTO: NS Name Chishine Pol Address Wir 43074 State Zip	. 2.	POBOX	ame 5944 ddress TMN 55459 tate Zip
3.	DESCRIPT	ION OF DONATION(S) Check for 8 From Take	0	Contact Person harst o	Phone Place in Principal's Fund. 018-1820-90 Leducation Don
4. 5. 6.		x Stutes of		RD FUNDS Ponsylvisor's Approval)	ACTIVITY FUNDS Stute of 5/6/6.
	-	TREASURER'S OF	FICI	E USE ONLY	
(Sup	erintendent's	Approval)	-	(Date)	(Agenda Date)
(Tre	asurer's Appr	roval)		(Date)	
	018-90 d Code)	OZ EBWMS PRINCIPALS	F	Qu	
NOT	ΓE:	Be advised that no commitment should be intent that the full or partial cost of the execution from outside sources unless the administrator and approved by the Board Donations are a regularly scheduled item can be processed on a timely basis. After Walnut School Board.	xpensie rec l of E	se would be covered uest has been proportion. It board meetings were to be a second to be a sec	ed by a donation to the Board of serly processed by the building which means that most donations
Cop Cop Cop	y:	Treasurer's Office Donor Building Administrator			

TO: Treasurer's	Office			
1. DONATIO	ON TO:	. 2. DONATION FRO	OM:	
Big Wa	Inut Middle School	Acoustic (Ceiling + Partition	
777	Inut Middle School Cheshive Rd	3500 E. C.	Ceiliz + Partition lame 115 Worth Rd	
Sunburg	Address - Off 43014 State Zip	Ann Arbar A	ddress	
City	State Zip	City St	M1 48108 tate Zip	
		Kyle You Contact Person	Phone	
3. DESCRIPT	IION OF DONATION(S)			
	to support the BWA	MS SOAR	PBIS Aconomy	
		711.0	1 D. D. Jordian	
		Donatis	n 018-1820-9002-	-(
4. VALUE O	F DONATION \$ 2,000.		n 018-1820-9002- Principal acc forbisis	Cc
	ON PROCESSED THROUGH		ACTIVITY FUNDS	
	WIROCESSED HIROUGH	BOARD FUNDS	ACTIVITY FUNDS	
6. (Principal's	s Approval)	(Advisor's Approval)	(Date)	
	TREASURER'S OF	FICE USE ONLY		
(Superintendent's	s Approval)	(Date)	(Agenda Date)	
(Treasurer's App	 proval)	(Date)		
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O18 - 90 (Fund Code)	002 BWMS PRINCIPALS FI	UND (SOAR)	Ву	
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NOTE:	Be advised that no commitment should be intent that the full or partial cost of the experience of the	xpense would be covere	ed by a donation to the Board of	•
	Education from outside sources unless th administrator and approved by the Board		perly processed by the building	
	Donations are a regularly scheduled item		which means that most donations	
	can be processed on a timely basis. After Walnut School Board.			
	11 aniat benedi Doata.			
Copy: 50 \$2	Treasurer's Office			
Сору: Сору:	Donor Building Administrator			

TO: Treasurer's	s Office		
1. DONATIO	ON TO:	2. DONATION FROM:	
Big 1	Name Name Name Name Name Name Name Name	Po Box 596	214 55459-0214 Zip
		Layska Ward Contact Person	Phone
3. DESCRIPT	TION OF DONATION(S)		
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final	Check	./ 🔾	
A. VALUE O	of DONATION \$_/00-00		
5. DONATIC	ON PROCESSED THROUGH	BOARD FUNDS AC	CTIVITY FUNDS
(Principal's	s Approval)	(Advisor's Approval)	(Date)
	TREASURER'S OI	FFICE USE ONLY	
(Superintendent's	s Approval)	(Date)	(Agenda Date)
(Treasurer's App	proval)	(Date)	
(Fund Code)	9005 BWE Principa	1s Fund	
NOTE:	Be advised that no commitment should be intent that the full or partial cost of the execution from outside sources unless the administrator and approved by the Board	expense would be covered by a donat the request has been properly processes	ion to the Board of
•	Donations are a regularly scheduled item can be processed on a timely basis. <u>Afterwall Malnut School Board.</u>		
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Donation Approval Request

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Meeting in accordance	with Board Pol	licy 7230. After	approval all do	onations become the
property of the Big Wal	nut School Bo	ard.		
Please fill this form out	as completely	as possible and	forward to the	Treasurer's Office.
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All monetary donations			ee (3) business d	lays if under \$1,000.00
and within twenty-four	(24) hours if o	ver \$1,000.00.		
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Submitted By:	Michel	1-eMD	ermott	Date: 5-16-16
Building/Department:	BW	15		
Donor Name:	Targe			
Donor Address:				
Donation Description:	Take ('havge	of Edi	ication Give Back
Donation Value:	50.0	0		
Account Type:	Rena	ISSCIN	Cl	
Principal/Supervisor Approval:	& am	brew Jods		Date: 5-16-16
		For Office Use	Only	
Fund/SPCC:	300-90	O	Account Name:	BWHS Renaissance

Copy: Supterintendent's Office

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Submitted By:	Stephanie Cooper	Date: 4/6//6
Building/Department:	BWE	
Donor Name:	Target	
Donor Address:		
Donation Description:	Target-Take Charge of	Education
Donation Value:	# 42.50	
Account Type:	Princ. Fund	
Principal/Supervisor Approval:	Stephanie Coopen	Date: 4/6/14
	For Office Use Only	
Fund/SPCC:	018 - 4005 Account Name	e: BWE Princ. Find

Donation Approval Request

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ding/Department:	BN	15		- 5
or Name:	Targe	t-lak	e Cha	rge of Lolc
or Address:				
ation Description:	Take	Charge	ge of	Education
ntion Value:	23.4			
ount Type:	Princ	pats?	und	
ncipal/Supervisor proval:		1		Date: 5-25-10
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	Sunk	My Ohjo	43074		Minn Addre	. N	55469	
	City	State	Zip		City State		Zip	
					Contact Person		Phone	
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4.	VALUE OF	DONATION	\$ 27/0		_ BW	ms Pr	incipals	018-900
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(Sup	perintendent's	Approval)		-	(Date)		(Agenda Date)	
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			d on a timely basis. A		proval all donations bec			
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Please fill this form out as completely as possible and forward to the Treasurer's Office.

All monetary donations must be deposited within three (3) business days if under \$1,000.00 and within twenty-four (24) hours if over \$1,000.00.

Submitted By:	Stephanie Cooper Date: 6/6/2016
Building/Department:	HSE
Donor Name:	Target
Donor Address:	
-	
Donation Description:	Target - Take Charge of Education
Donation Value:	# 7.84
Account Type:	HSE Princ Fund
Principal/Supervisor Approval:	Stephaire Crope Date: 6/6/16
	For Office Use Only
Fund/SPCC:	018-9003 Account Name: HSE Princ. Fund

Copy: Supterintendent's Office

Donation Approval Request

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All monetary donations must be deposited within three (3) business days if under \$1,000.00 and within twenty-four (24) hours if over \$1,000.00.

Submitted By:	Stephane Cooper	Date: 5/23/16
Building/Department:	BWHS Challenge Day	
Donor Name:	Anonymous	
Donor Address:	,	
Donation Description:	\$20.00 cash	
Donation Value:	\$ 20.00 casc	
Account Type:	BWHS Challenge Day	
Principal/Supervisor Approval:	Styphanie Coope	Date: 5/23/14
	For Office Use Only	
Fund/SPCC:	200 - 9271 Account Name	BWHS Challenge Day
Copy: Supterintendent's Office		

TO:	Treasurer's	Office		
1.	DONATIO	N TO: 2.	DONATION FROM:	rady Hick C
	Bial	ile Unit Middle		
	777	Name P. C.	Name	Mg Campaign Square Suite 601
		Address		isquere suite 601
	City	State Zip	City State	
	011)		Sing Biant	2.15
			Contact Person	Phone
3.	DESCRIPT	ION OF DONATION(S)		
	A 1	ock. / Plins	alum de Paris	indistund
	CN	CC () () () () ()	place in years	igus Ture
10				
4.	VALUE OF	7 DONATION \$ 150.00	_	
5.	DONATIO	N PROCESSED THROUGHBOA	ARD FUNDS AC	TIVITY FUNDS
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U.	(Principal's	Approval) (Å	dvisor's Approval)	(Date)//
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(Tre	asurer's Appi	roval)	(Date)	
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(Fur	nd Code)	DOFTED TIPLE TODI		
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		intent that the full or partial cost of the exper Education from outside sources unless the re	ase would be covered by a donat	ion to the Board of
	S	administrator and approved by the Board of		ed by the building
		Donations are a regularly scheduled item at	all board meetings which means	that most donations
		can be processed on a timely basis. After ap Walnut School Board.		
		The annual Dolloof Double.		E G. E I V E N
Cop	by: W	Treasurer's Office		MAN & C DEC'D
Cop		Donor Building Administrator		MAT 1 0 KECD
Cop	·J ·	Dunding Administrator		

Donation	Approval	Request
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property of the Dig 112	T	a secondary of the				
Please fill this form out	as completely 2	s possible and	forward to the	Treasure	r's Office.	
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All monetary donations must be deposited within three (3) business days if under \$1,000.00 and within twenty-four (24) hours if over \$1,000.00.						
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Submitted By:	VIICHEL	IT IVI	VVVIOIT	Date. \		
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Building/Department:	DMLIO					
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Donor Name:	060016	acur	ITCY			
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Donor Address:	I					
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		For Office Use	e Only			
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Fund/SDCC:	300 - 9001		Account Name:	1	DEGET VED	
Fund/SPCC:	20 1001		BWH	-	MAY 1 6 REC'D	
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