

Big Walnut Local School District

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: Stephanie Cooper Date: 5/25/16

For Office Use Only

Fund/SPCC: 018-9003 Account Name: HSE Princ Fund

✓ Copy: Superintendent's Office

BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION

TO: Treasurer's Office

1. DONATION TO:

BWHS Challenge Day

Name

Address

City

State

Zip

2. DONATION FROM:

Mary McRury

Name

PO Box 89

Address

Sunbury

OH

43074

City

State

Zip

Contact Person

Phone

3. DESCRIPTION OF DONATION(S)

Challenge Day

4. VALUE OF DONATION

\$ 100⁰⁰

5. DONATION PROCESSED THROUGH

BOARD FUNDS

X

ACTIVITY FUNDS

6.

(Principal's Approval)

[Signature]
(Advisor's Approval)

5-17-16

(Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval)

(Date)

(Agenda Date)

(Treasurer's Approval)

(Date)

200-9271 BWHS Challenge Day

(Fund Code)

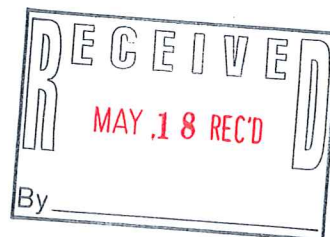
NOTE:

Be advised that no commitment should be made or service performed by any persons with the intent that the full or partial cost of the expense would be covered by a donation to the Board of Education from outside sources unless the request has been properly processed by the building administrator and approved by the Board of Education.

Donations are a regularly scheduled item at all board meetings which means that most donations can be processed on a timely basis. After approval all donations become the property of the Big Walnut School Board.

Copy: u
Copy:
Copy:

Treasurer's Office
Donor
Building Administrator



BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION

TO: Treasurer's Office

1. DONATION TO:

BWMS
Name
777 Chesfield Rd
Address
Sunbury, Ohio 43074
City State Zip

2. DONATION FROM:

Target
Name
PO Box 59214
Address
Minneapolis MN 55459
City State Zip

NA
Contact Person Phone

3. DESCRIPTION OF DONATION(S)

Check for \$50
from Take Charge of Education
Program.
Place in Principal's Fund.
018-1820-9002-002
Donations

4. VALUE OF DONATION \$ 50 -

5. DONATION PROCESSED THROUGH BOARD FUNDS ☒ ACTIVITY FUNDS

6. Penny Stutevst Penny Stutevst 5/16/16
(Principal's Approval) (Advisor's Approval) (Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval)

(Date)

(Agenda Date)

(Treasurer's Approval)

(Date)

018-9002 BWMS PRINCIPALS FUND
(Fund Code)

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Copy: sc 2/4 Treasurer's Office
Copy: Donor
Copy: Building Administrator

BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION

TO: Treasurer's Office

1. DONATION TO:

Big Walnut Middle School
Name
777 Cheshire Rd
Address
Sunbury OH 43074
City State Zip

2. DONATION FROM:

Acoustic Ceiling + Partition
Name
3500 E. Ellsworth Rd
Address
Ann Arbor MI 48108
City State Zip
Kyle Young
Contact Person Phone

3. DESCRIPTION OF DONATION(S)

Funds to support the BWMS SOAR PBIS program

Donation 018-1826-9002-002

4. VALUE OF DONATION \$ 2,000.00

5. DONATION PROCESSED THROUGH _____ BOARD FUNDS ☒ ACTIVITY FUNDS

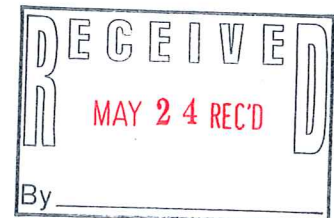
6. _____
(Principal's Approval) (Advisor's Approval) (Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval) (Date) (Agenda Date)

(Treasurer's Approval) (Date)

018-9002 BWMS PRINCIPALS FUND (SOAR)
(Fund Code)



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✓ Copy: SC 5/24 Treasurer's Office
Copy: Donor
Copy: Building Administrator

BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION

TO: Treasurer's Office

1. DONATION TO:

Big Walnut Elem.
Name
940 S. OLD 3C HWY
Address
Sunbury OH 43074
City State Zip

2. DONATION FROM:

Target
Name
P O Box 59214
Address
Minneapolis MN 55459-0214
City State Zip
Laysha Ward
Contact Person Phone

3. DESCRIPTION OF DONATION(S)

Take Care of Education Donation program
final check

4. VALUE OF DONATION \$ 100.00

5. DONATION PROCESSED THROUGH _____ BOARD FUNDS _____ ACTIVITY FUNDS

6. [Signature]
(Principal's Approval) (Advisor's Approval) (Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval) (Date) (Agenda Date)

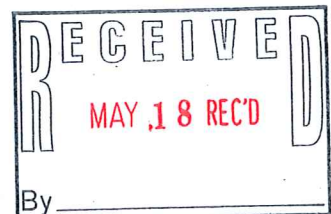
(Treasurer's Approval) (Date)

018-9005 BWE Principals Fund
(Fund Code)

NOTE: Be advised that no commitment should be made or service performed by any persons with the intent that the full or partial cost of the expense would be covered by a donation to the Board of Education from outside sources unless the request has been properly processed by the building administrator and approved by the Board of Education.

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✓ Copy: sc 5/10 Treasurer's Office
Copy: Donor
Copy: Building Administrator



Big Walnut Local School District

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Submitted By: Michelle McDermott Date: 5-16-16

Building/Department: BWHS

Donor Name: Target

Donor Address: _____

Donation Description: Take Charge of Education Give Back

Donation Value: 50.00

Account Type: Renaissance

Principal/Supervisor Approval: [Signature] Andrew J. [Signature] Date: 5-16-16

For Office Use Only

Fund/SPCC: 300-9001 Account Name: BWHS Renaissance

Copy: Superintendent's Office

Big Walnut Local School District

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Submitted By: Stephanie Cooper Date: 4/6/16

Building/Department: BWE

Donor Name: Target

Donor Address: _____

Donation Description: Target - Take Charge of Education

Donation Value: \$62.50

Account Type: Princ. Fund

Principal/Supervisor Approval: Stephanie Cooper Date: 4/6/16

For Office Use Only

✓ Fund/SPCC: 018-9005 Account Name: BWE Princ. Fund

Big Walnut Local School District

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Submitted By: Michelle McDermott Date: 5-25-16

Building/Department: BW HS

Donor Name: Target - Take Charge of Education

Donor Address: _____

Donation Description: Take Charge of Education Reward

Donation Value: 23.41

Account Type: Principal's Fund

Principal/Supervisor Approval: _____ Date: 5-25-16

For Office Use Only

Fund/SPCC: 018-9001 Account Name: BWHS PRINC. FUND

Copy: Superintendent's Office

BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION



TO: Treasurer's Office

1. DONATION TO:

BWMS
Name
777 Chesher Rd
Address
Sunbury Ohio 43074
City State Zip

2. DONATION FROM:

Target
Name
PO Box 509
Address
Minn. MN 55469
City State Zip
NA
Contact Person Phone

3. DESCRIPTION OF DONATION(S)

Check for 27¹⁰ from Take Charge
of education

4. VALUE OF DONATION \$ 27¹⁰

BWMS Principals 018-9002

5. DONATION PROCESSED THROUGH BOARD FUNDS ☒ ACTIVITY FUNDS

6. Penny Stuter Penny Stuter 6/1/16
(Principal's Approval) (Advisor's Approval) (Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval)

(Date)

(Agenda Date)

(Treasurer's Approval)

(Date)

018-9002 BWMS Principals Fund
(Fund Code)

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✓ Copy: sc 4/6 Treasurer's Office
Copy: Donor
Copy: Building Administrator

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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: Stephanie Cooper Date: 6/6/16

For Office Use Only

Fund/SPCC: 018-9003 Account Name: HSE Princ. Fund

✓
Copy: Superintendent's Office

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Submitted By: Stephanie Cooper Date: 5/23/16

Building/Department: BWHS Challenge Day

Donor Name: Anonymous

Donor Address: _____

Donation Description: \$20.00 cash

Donation Value: \$20.00 cash

Account Type: BWHS Challenge Day

Principal/Supervisor Approval: Stephanie Cooper Date: 5/23/16

For Office Use Only

Fund/SPCC: 200-9271 Account Name: BWHS Challenge Day

✓ Copy: Superintendent's Office

BIG WALNUT LOCAL SCHOOLS
REQUEST APPROVAL FOR DONATION

TO: Treasurer's Office

1. DONATION TO:

Big Walnut Middle
Name
777 Chesire Rd
Address
Sunbury Oh 43074
City State Zip

2. DONATION FROM:

Brady Hicks
Name
Employee Giving Campaign
Address
300 Brickston Square Suite 601
Andover MA 01810
City State Zip

Contact Person

Phone

3. DESCRIPTION OF DONATION(S)

Check. (Please place in Principal's fund)

4. VALUE OF DONATION \$ 150.00

5. DONATION PROCESSED THROUGH BOARD FUNDS ☒ ACTIVITY FUNDS

6. Penny Stutevost Penny Stutevost 5/13/16
(Principal's Approval) (Advisor's Approval) (Date)

TREASURER'S OFFICE USE ONLY

(Superintendent's Approval)

(Date)

(Agenda Date)

(Treasurer's Approval)

(Date)

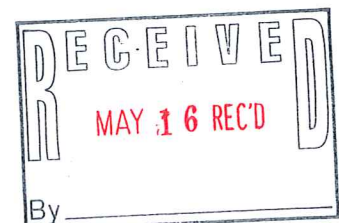
018-9002 BWMS PRINC FUND
(Fund Code)

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✓ Copy: W Treasurer's Office
Copy: Donor
Copy: Building Administrator



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Submitted By: Michelle McDermott Date: 5-13-16

Building/Department: BWHS


Donor Name: Jessica Currier

Donor Address: _____

Donation Description: Employee Give Back

Donation Value: 30.00

Account Type: Renaissance Fund

Principal/Supervisor Approval:  Date: 5-13-16

For Office Use Only

Fund/SPCC: 300 - 9001 Account Name: BWHS

Copy: Superintendent's Office

RENAISSANCE

