

**PEQUANNOCK TOWNSHIP BOARD OF EDUCATION  
DONATION/GIFT FORM**

**Date** \_\_\_\_\_

**School** \_\_\_\_\_

**Person Accepting Donation/Gift** \_\_\_\_\_

**Description** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Value** \_\_\_\_\_

**Donated By:**    **Name** \_\_\_\_\_  
                      **Address** \_\_\_\_\_  
                      **Telephone** \_\_\_\_\_

**I am requesting permission to accept the donation/gift listed above:**

\_\_\_\_\_  
*Principal/Supervisor*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Director of Facilities (if necessary)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Superintendent of Schools Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
Board Approval Date