

## Donation (Cash / Property) to the Beaufort County School District

Completion of this form is required prior to the district's consideration of a proposed donation to the Beaufort County School District. This form is to be completed in its entirety and submitted to the Chief Financial Officer prior to receipt of any donated goods, services, or monetary donations of \$1,000 and above. Donations \$5,000 or greater must be approved by the Board of Education.

Date Form Completed: \_\_\_\_\_

Organization/Individual Making Donation: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City, State, Zip)

Daytime Phone #: \_\_\_\_\_

Description of Donation / Gift: \_\_\_\_\_ Approximate Value: \_\_\_\_\_

Explain how this gift will be used: \_\_\_\_\_

Monetary Gift: Explain how the funds will be used: \_\_\_\_\_

Recipient(s) of Donation (school, athletics program, etc.) \_\_\_\_\_

Acknowledgments: (optional)

In honor of: \_\_\_\_\_

In memory of: \_\_\_\_\_

Acknowledgement Contact: \_\_\_\_\_

Acknowledgement Address: \_\_\_\_\_

Are there conditions of use attached to the gift: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain conditions: \_\_\_\_\_

Are there installation costs, site preparation costs, labor costs, or equipment need for installation, etc?  
\_\_\_\_\_ If yes, who will be responsible for the costs? \_\_\_\_\_

What is the annual maintenance cost of the donation if any? (be specific) \_\_\_\_\_

Are there additional costs to the school district not indicated above? (be specific) \_\_\_\_\_

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
School Name

### For District Office Use Only

Accepted by Superintendent (or designee): \_\_\_\_\_  
Signature Date

Accepted by Board of Education (items \$5,000 or greater) on: \_\_\_\_\_  
Date of Board Meeting

If approved by the Board of Education, accepted by the Chairman of the Board of Education:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date