DONATED FUNDS/PROPERTY/EQUIPMENT

(Board approval is required for gifts of \$10,000 or more)

DONOR'S NAME:	
	CITY:
STATE: ZIP CODI	E:EMAIL ADDRESS:
PHONE NUMBER:	VALUE OF DONATION:
	ΓΙΟΝ:
	VIN #
copy of form 1098-C to you	leduction of more than \$500.00 for a vehicle contribution, you must attach a Ir federal tax return. Please include your social security and or TIN number a pleted copy of form 1098-C will be mailed to you.
VALUE OF DONATION: 5	S SSN or TIN:
MAILING ADDRESS (align	ned with SSN/TIN):
(In order to take	this deduction, please attach form showing how value was determined.)
IF FOR A SPECIFIC PURP	OSE INDICATE BELOW:
e, e	quests shall become Kennewick School District #17 property and at the may be used in a particular school.
RECEIVED BY:	DATE:
SCHOOL OR LOCATION	J:
The Kennewick School Dist	rict acknowledges receipt of the above
Date:	Received by superintendent or designee:
Route completed form to B	Business Office at: <u>businessoffice@ksd.org</u>