



This form is to acknowledge the intention to donate the items listed below to Bellingham Public Schools. We appreciate your interest in assisting us in providing the best educational experience possible for our children. Please be assured that your gift is valued and will be used wisely.  
(Required for all donations valued at \$5,000 or greater, or for lesser amounts if requested by the donor.)

**A. DONATION DETAILS**

**i. Donation Date:**

**ii. Items Donated (please check one and give details):**

<input type="checkbox"/> Equipment	<input type="text"/>	\$ <input type="text"/>
	Details	Estimated Value
<input type="checkbox"/> Supplies	<input type="text"/>	\$ <input type="text"/>
	Details	Estimated Value
<input type="checkbox"/> Funds	<input type="text"/>	\$ <input type="text"/>
	Details	Estimated Value

**iii. Purpose of Donation (please check one):**

Use of donation is left to the discretion of the Bellingham School District

The intended purpose of this donation is: \*

*\* Note: When contributions are intended for a specific purpose or location, the Bellingham School District will make every effort to honor those intentions.*

**iv. Donation made to (School or Program name):**

**v. Donation made by:**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Business or Last Name	First Name	Middle Initial(s)
<b>Mailing Address and Phone:</b>		
<input type="text"/>	<input type="text"/>	
Street address, P.O. box	Apartment, suite, unit, building, floor, etc	
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	ZIP code
<input type="text"/>	<input type="text"/>	
Phone	Email	

**B. DONOR SIGNATURE AGREEMENT**

Signature:

**C. APPROVED BY**

Principal/Program Administrator

Board of Directors (Donations valued at \$5,000 or greater)