



Township Public Schools

BOARD AGENDA DATE

DONATION FORM

(Above area for Business Office Stamp)

(Above area for Business Office Use)

Date: _____

From: _____

Phone: _____ Email: _____

Please place the following donation on the next Wayne Board of Ed Agenda.

Donation To: _____

Donation From: _____

Donation Description: _____

Amount of Donated Check: _____ OR Value of Donated Item(s): _____

Donor Information:

(All information needed. If more than one donor, please attach full list of names and addresses.)

Name: _____

Company: _____

Address: _____

Signature of person sending in donation

Name of Principal Approving

Signature of Principal Approving

Name of Director Approving

Signature of Director Approving

ALL DONATION FORMS MUST BE SUBMITTED WITH COPIES OF DONATION RECEIPT INFORMATION