

Freeman Public School District

1001 S. Wipf St.
Freeman, SD 57029

Donation Form

Donor Information to be used for Acknowledgements: (please print or type)

Name of Donor:					
Mailing Address:					
City:		State:		Zip Code:	
Telephone (home):					
Telephone (business):		Fax:			
Email:					
Designation of donation (list project/club/sport/program to receive donation):					
Description of Donation (If monetary donation, list the exact amount; if other than monetary donation, include a detailed description of each item, including serial number, model number, color, etc.)					
Check #:		Amount:		Dated:	
Donor's estimate of value:					

Please make checks, corporate matches, or other gifts payable to:

Freeman Public School
District PO Box 220
Freeman, SD 57029

To Be Completed by School:

Donations must be approved and accepted by the Board of Education.

1. Please forward completed form to the district business office.
2. Please attach a copy of this form to the monetary donation.

Receiving School	Freeman Public School District		
Receive by: (print name)		Received by (Signature):	
Date Received:		Administrator Signature:	

To Be Completed by Business Office:

Account Number to receive monetary donation:	
Date of Agenda Review:	
Date Approved by Board:	
Date Donor Recognition Sent:	