

# GIFT DONATION FORM

## NORTH READING PUBLIC SCHOOLS

**GIFT ITEM:**

**Recipient/  
Purpose:**

**Donor's  
Name:**

**Address:**

Describe any site changes required to accommodate item (e.g room or land preparation):

\*\*\*\*\*

**Form Completed by:**

### Approvals

**Principal/  
Program Leader:**

Date

**Superintendent:**

Date

**Finance Director:**

Date

\*\*\*\*\*

### BUSINESS OFFICE USE ONLY:

**Date Listed on School Committee**

**Agenda:** \_\_\_\_\_

**Date Listed on Gift Receipt**

**Master:** \_\_\_\_\_

**Date Acknowledgement Letter**

**Sent:** \_\_\_\_\_

**Deposit Munis Revenue Account  
Code:**