

# STATEMENT OF DONATED FUNDS AND/OR EQUIPMENT

This form will be used for all donations to the Dekalb County School District.

Location # 256 Location Name Livsey Elem. Date 5/27/2022  
Source of Donation Livsey School Parent Teacher Organization

Amount Donated (Cash/Check) \$ 21,480.00

Estimated Value Donated:

A. Equipment \$ 21,480.00

B. Goods/Services \$ \_\_\_\_\_

C. Number of Volunteer Hours (July 1 – June 30) \_\_\_\_\_

Date Accepted: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

Check Number: \_\_\_\_\_

Donor specified funds are to be used as follows: (Please check)

- |  |   |
|--|---|
| <input type="checkbox"/> 1. Motivational activities for students | <input checked="" type="checkbox"/> 5. Equipment and/or equipment maintenance |
| <input type="checkbox"/> 2. Teacher recognition efforts          | <input type="checkbox"/> 6. Office Support                                    |
| <input type="checkbox"/> 3. Community/citizen projects           | <input type="checkbox"/> 7. Scholarship(s)                                    |
| <input type="checkbox"/> 4. Instructional Activities             | <input type="checkbox"/> 8. Building and grounds                              |
|  | <input type="checkbox"/> 9. Other (Specify) _____                             |

\* Appropriate distribution to be made at the discretion of the Regional Superintendent based on the above categories.\*

*Any expenditures of a personal nature will be considered illegal unless it is part of a planned program under items 1, 2 or 3.*

Donated funds shall be posted using the Donations account as listed in the Chart of Accounts section in the Local School Accounting Handbook.

Equipment Related Donation(s) – (below to be filled out for all equipment items valued at \$1000 and greater, per item)

-Please use a separate form for each item donated with an Estimated Value of \$1000 and greater per item-

Donated Equipment Name \_\_\_\_\_

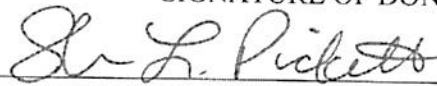
Manufacturer \_\_\_\_\_

Model Number \_\_\_\_\_

Serial Number \_\_\_\_\_

Barcode/Tag Number \_\_\_\_\_  
(Issued by Office of Capital Assets)

SIGNATURE OF DONOR

  
SIGNATURE OF PRINCIPAL/ADMINISTRATOR

DATE

5/27/2022  
DATE

**or Donated Funds:** Original to: Internal Audits Copy to: Donor Copy to: Location/School File  
**or Donated Equipment:** Original to: Office of Capital Assets Copy to Donor Copy to Location/School File  
**or Building/Grounds Projects:** Original to: Office of Capital Assets Copy to: Director of Design/Construction  
Copy to: Donor Copy to: School/Location File-