

**CENTRAL UNIFIED SCHOOL DISTRICT
GIFT PROPOSAL FORM**

SCHOOL OR DEPARTMENT: Educational Services **DATE** 2.23.18
DONOR: Friends of the Dance
ADDRESS: 7045 N. Tielman #102 Fresno 93711
(include City, State & Zip Code)

SECTION A: (To be completed by School/Dept.) **MONETARY VALUE OF GIFT:**

DESCRIPTION OF GIFT: (Include Make, Model and Serial Number) **Purchase Price:** \$636.98
leotards, tights, ballet and jazz shoes **Freight:** _____
Tax: _____
Installation: _____
Total Cost: **\$636.98**

Intended Use:
 Where will it be located/used? El Capitan and Glacier Point MS

Please complete the following:

	YES	NO
1. Is the gift already an approved item of equipment?	<u>x</u>	_____
2. Will the gift be delivered by the donor?	<u>x</u>	_____
3. Does the gift require building or ground space?	_____	<u>x</u>
4. Does the gift require installation?	_____	<u>x</u>
5. Will the gift eventually need to be replaced at School District expense?	_____	<u>x</u>
6. Is the gift donated for advertising purposes?	_____	<u>x</u>
7. If the gift is to be purchased, do you want it to be purchased by the School District for the donor? If so, Requisition # _____ is attached.	<u>x</u>	_____
8. Are District funds required for the purchase and/or installation of the gift?	<u>x</u>	_____
9. Will the district be expected to maintain/replace donation should failure occur?	_____	<u>x</u>

Janeen Casarjian - W.D. - 10/1/18 Janeen Casarjian - W.D. - 10/1/18
Print Name of Principal or Department Head Signature of Principal or Department Head

SECTION B: (To be completed by District Office)

Purchasing Director, Operational Services

1. What is the estimated cost of installation? _____ **YES** **NO**

2. Does the gift item require Division of State Architecture approval? _____

3. Will additional labor or equipment be required for maintenance and operation? _____

4. What is the total estimated value of this gift? _____

Remarks: _____

- Requires Public Works Bid
- Subject to Design Review and Approval
- Approved Disapproved Date _____

 Purchasing

 Director, Operational Services

 Asst. Superintendent/Chief Business Officer

 Board of Education

**CENTRAL UNIFIED SCHOOL DISTRICT
GIFT PROPOSAL FORM**

REC'D FEB 23 2018

SCHOOL OR DEPARTMENT: Ed Services - STEM/GATE (Science Fair) **DATE** Jan. 30, 2018
DONOR: Angela y Sermeno - Pearson
ADDRESS: 3252 Scott Ave., Clovis, CA 93619
(include City, State & Zip Code)

SECTION A: (To be completed by School/Dept.) **MONETARY VALUE OF GIFT:**

DESCRIPTION OF GIFT: (Include Make, Model and Serial Number)	Purchase Price: _____
<u>Check #2457 - Science Fair donation</u>	Freight: _____
_____	Tax: _____
_____	Installation: _____
_____	Total Cost: \$300.00

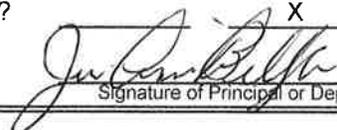
Intended Use:

Where will it be located/used? _____

Please complete the following:

	YES	NO
1. Is the gift already an approved item of equipment?	_____	X
2. Will the gift be delivered by the donor?	_____	X
3. Does the gift require building or ground space?	_____	X
4. Does the gift require installation?	_____	X
5. Will the gift eventually need to be replaced at School District expense?	_____	X
6. Is the gift donated for advertising purposes?	_____	X
7. If the gift is to be purchased, do you want it to be purchased by the School District for the donor?	_____	_____
If so, Requisition # _____ is attached.	_____	X
8. Are District funds required for the purchase and/or installation of the gift?	_____	X
9. Will the district be expected to maintain/replace donation should failure occur?	_____	X

Jerri Anna Billington
Print Name of Principal or Department Head


Signature of Principal or Department Head

SECTION B: (To be completed by District Office)

Purchasing Director, Operational Services

	YES	NO
1. What is the estimated cost of installation? _____	_____	_____
2. Does the gift item require Division of State Architecture approval?	_____	_____
3. Will additional labor or equipment be required for maintenance and operation?	_____	_____
4. What is the total estimated value of this gift? _____	_____	_____

Remarks: _____

- Requires Public Works Bid
- Subject to Design Review and Approval
- Approved Disapproved Date _____

Purchasing


Director, Operational Services

Asst. Superintendent/Chief Business Officer

Board of Education

**CENTRAL UNIFIED SCHOOL DISTRICT
GIFT PROPOSAL FORM**

SCHOOL OR DEPARTMENT: Saroyan Elementary **DATE** 2/28/18

DONOR: PG&E

ADDRESS: 6111 W. Plano parkway st 1000YC Plano TX 75093
(include City, State & Zip Code)

SECTION A: (To be completed by School/Dept.) **MONETARY VALUE OF GIFT:**

DESCRIPTION OF GIFT: (Include Make, Model and Serial Number)	Purchase Price: _____
cash donation to specified teachers	Freight: _____
_____	Tax: _____
_____	Installation: _____
_____	Total Cost: \$1,627.97

Intended Use:

Where will it be located/used? _____

Please complete the following:

	YES	NO
1. Is the gift already an approved item of equipment?	_____	_____ X
2. Will the gift be delivered by the donor?	_____	_____ X
3. Does the gift require building or ground space?	_____	_____
4. Does the gift require installation?	_____	_____ X
5. Will the gift eventually need to be replaced at School District expense?	_____	_____ X
6. Is the gift donated for advertising purposes?	_____	_____ X
7. If the gift is to be purchased, do you want it to be purchased by the School District for the donor?	_____	_____
If so, Requisition # _____ is attached.	_____	_____ X
8. Are District funds required for the purchase and/or installation of the gift?	_____	_____ X
9. Will the district be expected to maintain/replace donation should failure occur?	_____	_____ X

Patricia McCurley
Print Name of Principal or Department Head

Signature of Principal or Department Head

SECTION B: (To be completed by District Office)
 Purchasing Director, Operational Services

	YES	NO
1. What is the estimated cost of installation? _____	_____	_____
2. Does the gift item require Division of State Architecture approval?	_____	_____
3. Will additional labor or equipment be required for maintenance and operation?	_____	_____
4. What is the total estimated value of this gift? _____	_____	_____

Remarks: _____

- Requires Public Works Bid
- Subject to Design Review and Approval
- Approved Disapproved Date _____

Purchasing

Director, Operational Services

Asst. Superintendent/Chief Business Officer

Board of Education