



MT. VERNON

COMMUNITY SCHOOL CORPORATION

"Engage, Educate, and Empower Today's Students"

GIFTS, GRANTS, AND DONATIONS APPROVAL FORM

Reference Policy F275

Instructions: Please complete the following form and submit it to the Business Office for review and approval.

Donor Information

- Full Name/Organization Name: Kroger Rewards
- Contact Person (if applicable): _____
- Address: 1014 Vine Street
- City, State, ZIP Code: Cincinnati, OH 45202
- Phone Number: _____
- Email Address: _____

Donation Details

- Type of Donation: Monetary
- Description of Donation: Rewards
- Estimated Value \$712.01
- Date of Donation: 07/28/2025
- Purpose/Intended Use of Donation: For use for student activities.

___ Please click here if the donor wishes to remain anonymous.

___ Please check here if the donor will be in attendance at the board meeting for which their donation will be accepted.

Recipient's Name: Leah Everett, Treasurer

School's Name: Mt. Vernon High School

For Office Use Only

Received By: _____

Date Received: _____

School Board Approved Date: _____

SCHOOL BOARD: Shannon Walls Meghan Britt Chad Gray Kellie Freeman Stacy Nielsen

1806 W. State Road 234, Fortville, IN 46040 • www.MVCSC.k12.in.us • Office: (317) 485-3100 • Fax: (317) 485-3113

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SUMMARY COLLECTION FORM

Date: 8/12/25

MT. VERNON HIGH SCHOOL
8112 North 200 West
FORTVILLE, INDIANA 46040
(317) 485-3131

Number **3751**

Deposit To: Kroger / Pepsi ECA Time Frame of Fundraiser: _____

Reason for Receipts: 9550 R 9041700 0000 500 000
Kroger Reward
(Fundraiser, Field Trip...)

Sponsor: Brooke Thaupe / Leah Everett
(Please Print Name)

RECEIPT DETAIL:

CASH: \$ 0

CHECKS: \$ 712.01
(Detailed below or spreadsheet attached)

TOTAL: \$ 712.01

NOTE: All receipts for deposit must be accurately counted before turning in to the ECA Treasurer. Any summary found to have a discrepancy will be returned to the sponsor. Please face bills and roll change when possible. The ECA Treasurer is to provide an Official Receipt, Form SA-3, at the time the Collection Summary is turned in and the amount is verified for deposit.

I certify I have accurately accounted for all funds and reported the same herein.

Leah Everett
(Signature of Sponsor, Name is Printed Above)

Name of person who submitted money	Cash Amount	Check Amount	Check Number
<u>Kroger</u>		<u>712.01</u>	<u>504102870</u>
Total for cash and checks			

If additional deposit lines are needed complete an SA 8A or attach a detailed spreadsheet

Store
090648

Organization No.	Date	Check No.	Totals
	July 28, 2025	504102870	712.01

To Remove Document Fold and Tear Along This Perforation

THIS CHECK HAS MICROPRINTING AND A HEAT-ACTIVATED SECURITY CIRCLE ON BACK. IF NOT PRESENT DO NOT CASH.

Cabin L. Fike

THIS CHECK IS PRINTED WITH A BLUE SECURITY BACKGROUND ON WHITE PAPER. IF NOT PRESENT DO NOT CASH. A

ME

