



# 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: DYno ONE, INC
- Contact Person (if applicable): \_\_\_\_\_
- Address: 14671 N 250 W
- City, State, ZIP Code: Edinburgh, IN 46124
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

### Donation Details

- Type of Donation: Monetary
- Description of Donation: Ceck
- Estimated Value \$500
- Date of Donation: 08/1/2025
- Purpose/Intended Use of Donation: For use for Boys Tennis.

\_\_\_ Please click here if the donor wishes to remain anonymous. - NO

\_\_\_ Please check here if the donor will be in attendance at the board meeting for which their donation will be accepted. - NO

Recipient's Name: Leah Everett, Treasurer

School's Name: Mt. Vernon High Shool

### 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](http://www.MVCSC.k12.in.us) • Office: (317) 485-3100 • Fax: (317) 485-3113

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### SUMMARY COLLECTION FORM

Date: 8/14/2025

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

Number **3633**

Deposit To: Boys Tennis Time Frame of Fundraiser: \_\_\_\_\_

Reason for Receipts: Sponsorship  
(Fundraiser, Field Trip . . . )

Sponsor: Michaela Bova  
(Please Print Name)

#### RECEIPT DETAIL:

CASH: \$ \_\_\_\_\_

CHECKS: \$ 500.<sup>00</sup>  
(Detailed below or spreadsheet attached)

TOTAL: \$ 500.<sup>00</sup>

*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.

Michaela Bova  
(Signature of Sponsor, Name is Printed Above)

Name of person who submitted money	Cash Amount	Check Amount	Check Number
<u>Dyno One</u>		<u>500</u>	<u>27335</u>
Total for cash and checks		<u>\$500.<sup>00</sup></u>	

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