



# 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:** Dana Riddle
- **Contact Person (if applicable):**
- **Address:** 1123 W. 1000 N
- **City, State, ZIP Code:** Fortville, IN 46040
- **Phone Number:**
- **Email Address:** \_\_\_\_\_

### Donation Details

- **Type of Donation:** Monetary
- **Description of Donation:** Donation to help with players expenses to GBB Account
- **Estimated Value** - \$150.00
- **Date of Donation:** 9/28/2025
- **Purpose/Intended Use of Donation:** For use by the girls basketball program to help cover player expenses.

\_\_\_ 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: \_\_\_\_\_