



# 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: Kinsey's Italian Cafe
- Contact Person (if applicable): \_\_\_\_\_
- Address: 6383 W Broadway
- City, State, ZIP Code: McCordsville, IN 46055
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

### Donation Details

- Type of Donation: Monetary
- Description of Donation: Prom Sponsorship
- Estimated Value \$350
- Date of Donation: 1/12/2026
- Purpose/Intended Use of Donation: For use by the prom committee for 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: \_\_\_\_\_