



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:** Kids In Need Foundation
- **Contact Person (if applicable):** Emily Pineda
- **Address:** 200 S Owasso Blvd E
- **City, State, ZIP Code:** Little Canada, MN 55117
- **Phone Number:** 763-296-6820
- **Email Address:** epineda@kinf.org
- **Donation Details**
- **Type of Donation:** _____ School Supplies _____
- **Description of Donation:**
Pencils, Folders, Paper, Scissors
- **Estimated Value** (Gifts or donations over one hundred dollars (\$100.00) must be accepted by the School Board prior to the receipt of such gifts or donations) : \$ _1.036.00_
- **Date of Donation:** _____ 05/27/2026 _____
- **Purpose/Intended Use of Donation:**
Provide students with needed school supplies

____ 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: Teresa McGow-Russell

School's Name: Mt. Comfort Elementary

For Office Use Only

Received By: _____

Date Received: _____

School Board Approved Date: _____