



North Kitsap School District
REQUEST FOR ACCEPTANCE OF GIFTS

*Gave TO BOARD on
 10-2-18*

Policy 6114F
 FINANCIAL MANAGEMENT, Gifts

Date: 9/17/18 Accepted by Kathy Lee School Receipt# 226163

School/Department/Program Receiving gift: Richard Gordon Elementary

Budget Code to be credited: 0300-27-5610-117-0000-0000-1 Business Office Receipt# 9-18-18

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 2700 . 00 OR

Description of gift & cash value: \$ _____ (determined by donor)

(Gifts for the purchase of supplies/equipment must include cost of installation by licensed contractor or agreement by the Maintenance Department to provide installation)

Description: funds to be used to renew Accelerated Reader Subscription

(The following information must be provided) Person/Organization Donating Gift --Please print

Name of Person Responsible: _____

Business/Organization: Richard Gordon PTA

Mailing Address: 26331 Barber Cutoff Rd

City Kingston State WA Zip Code 98346 Phone: (360) 396-3969

APPROVAL(S):

Principal/Program Manager Approval:  Date: 9-18-18

(Required for all donations)

Technology Approval _____ Date: _____

(Required for all donations of computers, printers and software to comply with District Standards)

Capital Projects Approval _____ Date: _____

(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

Facilities/Maintenance Approval _____ Date: _____

(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

Please note: Attach transmittal forms, backup material or letters from individuals/organizations donating gifts. We would also appreciate a copy of any thank you letter that was written by your building.

All donations given to the North Kitsap School District must have a donation form submitted to the business office. This includes all Booster or PTA/PTSA parent group donations.



North Kitsap School District
REQUEST FOR ACCEPTANCE OF GIFTS

Gave TO Board on
10-2-18 Policy 6114F
 FINANCIAL MANAGEMENT, Gifts

Date: 9/14/18 Accepted by Kathy lee School Receipt# 226074

School/Department/Program Receiving gift: Richard Gordon Elementary

Budget Code to be credited: 0300-27-5610-117-0000-0000-1 Business Office Receipt# 9-18-18

GF or ASB (Please circle)
 GF ASB

Nature of gift: Cash amount donated: \$ 3295 . 00 OR
 Description of gift & cash value: \$ _____ (determined by donor)

(Gifts for the purchase of supplies/equipment must include cost of installation by licensed contractor or agreement by the Maintenance Department to provide installation)

Description: funds to be used to renew Reflex Math Site License

(The following information must be provided) Person/Organization Donating Gift --Please print

Name of Person Responsible: _____

Business/Organization: Richard Gordon Elementary PTA

Mailing Address: 26331 Barber Cutoff Rd

City Kingston State WA Zip Code 98346 Phone: (360) 396-3969

APPROVAL(S):

Principal/Program Manager Approval: *Chris* Date: 9-17-18
(Required for all donations)

Technology Approval _____ Date: _____
(Required for all donations of computers, printers and software to comply with District Standards)

Capital Projects Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

Facilities/Maintenance Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

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REQUEST FOR ACCEPTANCE OF GIFTS

Give to Board on
10-2-18 Policy 6114F
 FINANCIAL MANAGEMENT, Gifts

Date: 9/14/18 Accepted by Kathy lee School Receipt# 226074

School/Department/Program Receiving gift: Richard Gordon Elementary

Budget Code to be credited: 0300-27-5610-117-0000-0000-1 Business Office Receipt# 9-18-18

GF or ASB (Please circle)
 GF ASB

Nature of gift: Cash amount donated: \$ 2796 . 40 OR
 Description of gift & cash value: \$ _____ (determined by donor)

(Gifts for the purchase of supplies/equipment must include cost of installation by licensed contractor or agreement by the Maintenance Department to provide installation)

Description: funds to be used to renew Lexia Core 5 student subscription

(The following information must be provided) Person/Organization Donating Gift --Please print

Name of Person Responsible: _____

Business/Organization: Richard Gordon Elementary PTA

Mailing Address: 26331 Barber Cutoff Rd

City Kingston State WA Zip Code 98346 Phone: (360) 396-3969

APPROVAL(S):

Principal/Program Manager Approval: *Chf* Date: 9-17-18
(Required for all donations)

Technology Approval _____ Date: _____
(Required for all donations of computers, printers and software to comply with District Standards)

Capital Projects Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

Facilities/Maintenance Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

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REQUEST FOR ACCEPTANCE OF GIFTS

*Given to Board on
10-2-18*

Policy 6114F
FINANCIAL MANAGEMENT, Gifts

Date: 9/17/18 Accepted by PMS, B.Roberts School Receipt# 226145

School/Department/Program Receiving gift: Poulsbo Middle School

Budget Code to be credited: 0300 25 000 301 0000 0000 1 Business Office Receipt# 9-19-18

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 3276 . 00 OR

Description of gift & cash value: \$ _____ (determined by donor)

(Gifts for the purchase of supplies/equipment must include cost of installation by licensed contractor or agreement by the Maintenance Department to provide installation)

Description: Donated funds to cover the cost of school planners for all students

(The following information must be provided) Person/Organization Donating Gift --Please print

Name of Person Responsible: Jeff Lingenbrink

Business/Organization: Johnson and Lingenbrink, PLLC

Mailing Address: 3511 NW Bucklin Hill Rd

City Silverdale State WA Zip Code 98383 Phone: (360) 337-2020

APPROVAL(S):

Principal/Program Manager Approval: [Signature] Date: 9/19/18
(Required for all donations)

Technology Approval _____ Date: _____
(Required for all donations of computers, printers and software to comply with District Standards)

Capital Projects Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

Facilities/Maintenance Approval _____ Date: _____
(Required for all donations that require installation and/or maintenance of supplies/equipment on District property)

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JOHNSON AND LINGENBRINK, PLLC
3511 NW BUCKLIN HILL RD
SILVERDALE, WA 98383
360-337-2020

KITSAP BANK
800-263-6537
www.kitsapbank.com

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98-290/1251
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9/6/2018

PAY TO THE
ORDER OF

Poulsbo Middle School

\$ 3,276.00

Three thousand TWO Hundred seventy six & 00/100

DOLLARS

MEMO Planners

Jeff Lingenbrink
AUTHORIZED SIGNATURE

⑈001976⑈ ⑆125102906⑆ 0291532411⑈

*Donation
for Planners*

Thank you for your thoughtful gift covering the cost of our student planners. Organizational skills are an important part of life skills. At Paulsbo Middle School our staff are dedicated to helping students learn those skills and the planners are one of those tools essential for this process. We really appreciate your generosity.

Staff at Paulsbo Middle School