



North Kitsap School District  
**REQUEST FOR ACCEPTANCE OF GIFTS**

*Given TO Board  
 7/5/17*

Policy 6114F  
 FINANCIAL MANAGEMENT, Gifts

Date: 5/24/17 Accepted by Kingston High School School Receipt# 203179

School/Department/Program Receiving gift: PE Department

Budget Code to be credited: 0300 25 0000 440 3901 0000 Business Office Receipt# 5-31-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 2,500 . 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: Appendix X grant submitted by Jay DeVries

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

Name of Person Responsible: Jeromy Sullivan

*JUL - 5 2017*

Business/Organization: Port Gamble S'Klallam Tribe

**ENTERED**

Mailing Address: 31912 Little Boston Road

City Kingston State WA Phone: ( 360 ) 297-2646

**APPROVAL(S):**

Principal/Program Manager Approval: *Christy Cole* Date: *5/24/17*  
*(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**

GALE TO BOARD  
 7/5/17

Policy 6114F  
 FINANCIAL MANAGEMENT, Gifts

Date: 5/26/17 Accepted by Richard Henert School Receipt# 203178

School/Department/Program Receiving gift: KHS General Athletics

Budget Code to be credited: 2000-00-0000-440-0000-0000 Business Office Receipt# 5-31-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 5,000.00 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: Weight room equip & Athletic Clinic

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

Name of Person Responsible: Brad Curderson

Business/Organization: KHS Athletic Boosters JUL - 5 2017

Mailing Address: PO Box 1448 ENTERED

City Kenington State WA Zip Code 98346 Phone: (360) 340-1477

**APPROVAL(S):**

Principal/Program Manager Approval: [Signature] Date: 5/30/17  
*(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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# KINGSTON HIGH SCHOOL

Christiana Cole, Principal  
Andrew Crandall, Assistant Principal  
Roxanne Nix-Shar, Assistant Principal

June 20, 2017

KHS Athletic Boosters  
PO Box 1448  
Kingston, WA 98346

Dear Boosters,

Thank you for doing a tremendous job this year in raising funds for the Kingston High School athletic programs. We have received the following recent donations and have applied the money specifically to the designated teams:

\$800.00 ck#1672 - Track & X-Country jackets  
\$5000.00 ck#1671 - Weight Room equipment and BFS Clinic  
\$1396.06 ck#1675 - Boy's & Girl's Swim timing equipment  
\$758.35 ck#1674 - Football summer camp

Thank you for your hard work on behalf of our athletes. We always appreciate your Buccaneer Spirit!

Sincerely,

Lori Camp  
ASB Secretary

KINGSTON HIGH SCHOOL  
26201 SIYAYA AVE NE  
394-1200

Receipt #: 203178 Clerk: LCamp31  
Manual #: Terminal: 1

5/26/2017 3:12 PM

N52  
N52  
KHS Athletic Boosters, KHS Athletic Boosters

Qty	Item	Price
1	2000 General Athletics	5000.00

Donation for weight rm & BFS Clinic

Subtotal	5000.00
Tax	0.00
Total	5000.00
Check 1671	5000.00
Change Due	0.00

GO BUCCANEERS!



North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

GAVE TO BOARD  
5/31/17

Date: 5/31/17 Accepted by KEELY SIMKINS School Receipt# \_\_\_\_\_

School/Department/Program Receiving gift: VINLAND ELEMENTARY

Budget Code to be credited: 0300 25 0000 116 Business Office Receipt# 6.2-17

GF or ASB (Please circle)

Nature of gift: \_\_\_\_\_ Cash amount donated: \$ 4,250.00 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: SAFENAY - ALBERTSON'S GRANT TO PURCHASE ADDITIONAL IPADS FOR THE DUAL LANGUAGE PROGRAM AT VINLAND ELEM.

*(The following information must be provided)* Person/Organization Donating Gift --Please print JUL - 5 2017

Name of Person Responsible: SARA OSBORNE **ENTERED**

Business/Organization: SAFENAY - ALBERTSON'S FOUNDATION

Mailing Address: 1121 124TH AVE NE

City BELLEVUE State WA Zip Code 98005 Phone: (425) 202-6475

**APPROVAL(S):**

Principal/Program Manager Approval: C M Cate Date: 5/31/17  
*(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.

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North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

GAVE TO BOARD  
6/5/17 Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

Date: 6/1/2017 Accepted by Jean Parke School Receipt# 203572

School/Department/Program Receiving gift: 5th grade outdoor education

Budget Code to be credited: 1320 00 0000 102 0000 0000 Business Office Receipt# 6-5-17

GF or ASB (Please circle)  
 GF  ASB

Nature of gift: \_\_\_\_\_ Cash amount donated: \$ 6398 . 30 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: donation to 5th grade Ft. Flagler Outdoor Education

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

Name of Person Responsible: Katie Vavrinec, Treasurer

Business/Organization: Poulsbo Elementary PTSA

Mailing Address: 18531 NE Noll Rd.

City Poulsbo State WA Zip Code 98370 Phone: ( 360 ) 396-3558

JUL - 5 2017  
ENTERED

**APPROVAL(S):**

Principal/Program Manager Approval: *CAVRO* Date: 6/2/17  
*(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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North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

GAVE TO BOARD  
6/5/17

Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

Date: 6/5/17 Accepted by Briana Dambacher School Receipt# 204119

School/Department/Program Receiving gift: Richard Gordon Elementary

Budget Code to be credited: 0300-27-5000-117-0000-0000 Business Office Receipt# 6-7-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 5000 . 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 purchase 7 32GB iPad Air 2, cases and apps for students with special needs

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

Name of Person Responsible: \_\_\_\_\_  
Business/Organization: Safeway-Albertsons Foundation NW Division  
Mailing Address: 1121-124th Avenue NE  
City Bellevue State WA Zip Code 98005-21 Phone: (\_\_\_\_) \_\_\_\_\_

JUL - 5 2017

ENTER

**APPROVAL(S):**

Principal/Program Manager Approval: Rain Tolleson Date: 6-6-17  
*(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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**North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS**

*Give to Board  
on 7/5/17*  
**Policy 6114F  
FINANCIAL MANAGEMENT, Gifts**

Date: 6/2/17 Accepted by David DiPrete School Receipt# 204150

School/Department/Program Receiving gift: Poulsbo Middle School

Budget Code to be credited: 0300-25-0000-301-0000-0000 Business Office Receipt# 6-8-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 5000 . 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: Grant for using Robotics in the Science Classroom

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

Name of Person Responsible: \_\_\_\_\_  
Business/Organization: Safeway Inc, Northwest Division JUL - 5 2017  
Mailing Address: 1121-124th Avenue NE ENTERED  
City Bellvue State WA Zip Code 98370 Phone: (\_\_\_\_) \_\_\_\_\_

**APPROVAL(S):**

Principal/Program Manager Approval: [Signature] Date: 6/7/17  
*(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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North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

GAVE TO BOARD  
7/5/2017

Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

Date: 6/6/17 Accepted by DIANN TAYLOR School Receipt# 204202

School/Department/Program Receiving gift: WOLFLE SPECIAL ED

Budget Code to be credited: 0300 25 0000 104 0000 0000 Business Office Receipt# 6-8-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 5000.00 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: Money to be used to make "safe zones" in the school for student to calm down when they are stressed, etc.

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

Name of Person Responsible: Sara Osborne, Seattle Division

Business/Organization: Safeway-Albertsons Foundation

Mailing Address: 20427 N. 27th Ave

City Phoenix State AZ Zip Code 85027 Phone: ( ) \_\_\_\_\_

JUL - 5 2017

ENTERED

**APPROVAL(S):**

Principal/Program Manager Approval: [Signature] Date: 6/7/17  
(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: \_\_\_\_\_  
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WOLFLE ELEMENTARY SCHOOL

27089 HIGHLAND ROAD NE  
KINGSTON, WA 98346

Receipt #: 204202    Clerk: Taylor  
Manual #:            Terminal: 1

6/6/2017 10:00 AM

Nonst-donation  
Nonst-donation  
NON STUDENT, G/F DONATION

Qty	Item	Price
1	Donations-gen Donation-Generic	5000.00

Albertsons Grant for SPED at wolfle

Subtotal	5000.00
Tax	0.00
Total	5000.00

Check	5000.00
279-0002015	

Change Due	0.00
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May 26, 2017

Wolfe Elementary  
North Kitsap School District  
27089 Highland Road NE  
Kingston, WA 98346

**RE: Innovation in Education Grant for Lisa Kympton**

Congratulations!!

A teacher in your school received an Innovation in Education Grant for the 2017-18 school year. We are very pleased that Ms. Kympton took the time to apply, and look forward to hearing about the impact in the classroom.

My Very Best,

Sara Osborne  
Foundation, Public & Government Affairs  
Safeway Inc. and Albertsons LLC, Seattle Division



**North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS**

*Given TO  
Board on 7/26/17*  
**Policy 6114F  
FINANCIAL MANAGEMENT, Gifts**

Date: 06/07/17 Accepted by Haley Warr School Receipt# \_\_\_\_\_

School/Department/Program Receiving gift: Squamish Elementary Meaningful work

Budget Code to be credited: 0300-27-3099-103-3200 Business Office Receipt# 6026-17

GF or ASB (Please circle)

GF  ASB

0300-3200

Nature of gift: \_\_\_\_\_ Cash amount donated: \$ 2500.00 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: donation to cover Sara Clark and Kristy Dresser and party at end of the year.

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

Name of Person Responsible: Squamish Elementary PTSA %

Business/Organization: Crystal Thornell and Naomi Nichols - Co-Presidents

Mailing Address: 18250 Park Blvd NE

City Squamish State WA Zip Code 91392 Phone: (\_\_\_\_) \_\_\_\_\_

**APPROVAL(S):**  
Principal/Program Manager Approval: Haley Warr Date: 06/07/17  
*(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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North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

Given TO BOARD  
on 7/26/17  
Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

Date: 06-05-17 Accepted by Haley Warr School Receipt# ✓

School/Department/Program Receiving gift: Intervention group supplies.

Budget Code to be credited: 590-0300-27-500-103-000 Business Office Receipt# 6-26-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 5000.00 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: grant for supplies for intervention groups

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

Name of Person Responsible: Sara Osborne, Foundation, Public & Government Affairs

Business/Organization: Safeway Inc and Albertsons LLC, Seattle Division

Mailing Address: 20427 N. 27th Avenue

City Phoenix State AZ Zip Code 85027 Phone: ( ) \_\_\_\_\_  
3241

**APPROVAL(S):**

Principal/Program Manager Approval: Haley Warr Date: 06-05-17  
(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: \_\_\_\_\_  
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May 26, 2017

Suquamish Elementary  
18950 Park Blvd NE  
Suquamish, WA 98392

**RE: Innovation in Education Grant for Lori Prantil**

Congratulations!!

A teacher in your school received an Innovation in Education Grant for the 2017-18 school year. We are very pleased that Ms. Prantil took the time to apply, and look forward to hearing about the impact in the classroom.

My Very Best,

A handwritten signature in black ink that reads "Sara Osborne". The signature is fluid and cursive, with a long horizontal stroke at the end.

Sara Osborne  
Foundation, Public & Government Affairs  
Safeway Inc. and Albertsons LLC, Seattle Division



---

Gwen Lyon, Principal  
18950 Park Blvd NE  
Suquamish, WA 98392  
(360) 396-3850

June 26, 2017

Dear Ms. Osborne,

I am writing to you on behalf of Lori Prantil at Suquamish Elementary. The Safeway & Albertsons grant awarded to Mrs. Prantil for intervention group supplies is very appreciated by the Mrs. Prantil and the students at our school. We appreciate your support and your \$5,000.00 monetary contribution to this school. Suquamish Elementary is a special place and our students will benefit from your generosity greatly.

Thank you again for your support!

Warm Regards,

Haley Warr, M.B.A.

Office Manager

---

North Kitsap School District

Dr. Laurynn Evans, Superintendent

18360 Caldart Ave. NE, Poulsbo WA 98370

(360) 396-3002





North Kitsap School District  
REQUEST FOR ACCEPTANCE OF GIFTS

Given TO Board  
on 7/26/17

Policy 6114F  
FINANCIAL MANAGEMENT, Gifts

Date: 6-27-17 Accepted by K. Simkins School Receipt# \_\_\_\_\_

School/Department/Program Receiving gift: Vinland Elementary

Budget Code to be credited: 0300 27 5000 116 1001 0000 Business Office Receipt# 7-3-17

GF or ASB (Please circle)

Nature of gift: Cash amount donated: \$ 7812.86 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 pay balance of 5th grade outdoor ed. (buses, teacher stipends, scholarships, etc.)

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

Name of Person Responsible: Linda May  
Business/Organization: PTSA President  
Mailing Address: 22104 Rhododendron Ln NW  
City Poulsbo State WA Zip Code 98370 Phone: (360) 394-3657

**APPROVAL(S):**

Principal/Program Manager Approval: [Signature] Date: 6/27/17  
(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: \_\_\_\_\_  
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