

LAMAR CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

***PERMISSION REQUEST
FOR ACCEPTANCE OF CASH AND/OR PERSONAL PROPERTY DONATIONS***

Date of Request _____

Name of School _____

Name of Donor _____

Address of Donor _____

Value of Donation* _____

Description of Property to be Donated _____

Signature of Donor _____

Projected Date of Delivery _____

Requested By _____

Date _____

APPROVALS

Principal _____ Date _____

Superintendent _____ Date _____

***Please attach copies of all available documentation. The estimated fair market value of the personal property must be provided by the donor at the time of donation.**