

# ***GIFT DECLARATION FORM***

Please complete the information requested below and return the form and your donation to:

Galt Joint Union School District  
Fiscal Services  
1018 C Street, Suite 210  
Galt, CA 95632

***Part A – Cash/Check Donation*** (Please make check payable to school or “GJUESD”)

I/we wish to make a cash/check donation as follows:

Amount of \$\_\_\_\_\_ to help fund the area(s) indicated below.

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***Part B – Purpose of Cash/Check Donation***

I/we would like the gift to be used as follows:

Band/Music Resources _____	Library Fund _____
Computers/Software _____	School Name: _____
GJUESD General Fund _____	Principal's Discretion _____
Field Trips _____	Technology _____
GALEP Riding Program _____	Other _____
	Specify: _____

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***Part C – Donation Other Than Cash***

I/we wish to donate \_\_\_\_\_ to \_\_\_\_\_ School, valued at \$\_\_\_\_\_. This value was determined by me/us, not GJUESD.

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***Part D – Donor's Information***

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\*\*\* Business Office Use Only (SACS) \*\*\*

FD	RESC	PY	OBJT	STE	GOAL	FCTN	OP1	OP2
__	__	__	__	__	__	__	__	__

\*\*\*\*\* (District Use Only) \*\*\*\*\*

Receipt verified by (Site Administrator)

Name \_\_\_\_\_

Title \_\_\_\_\_

Date Received \_\_\_\_\_