

LOS ANGELES UNIFIED SCHOOL DISTRICT
Accounting and Disbursements Division

BUL-5895.2
August 27, 2018

ATTACHMENT A

REQUEST TO PROCESS A DONATION

School/Office: _____ Cost Center _____

Contact Person _____ Telephone _____

DONOR INFORMATION

Name of Individual/Group/Company _____ Telephone _____

Address _____

FORM OF DONATION: Check (Attach) Prefunded Card Materials/Equipment/Services

AMOUNT OF CASH (VALUE OF NON-CASH) DONATION \$ _____

ACCOUNTING LINE _____

TYPE OF DONATION (Select one)

- CASH without donor-specified intent. Please describe below how this donation is intended to be used
- CASH with donor-specified program intent. Donors may stipulate that the donation should be used for a specific purpose or program only. Please describe below how this donation is to be used. Schools/offices should use the control sheet (Attachment C) to track expenditures.
- MATERIALS, EQUIPMENT, COMPUTERS, ART WORK, LIBRARY BOOKS, OR SERVICES
(Complete this form only for those items or services with a value of more than \$5,000. Be sure to list items whose value is \$500 or more on the annual inventory listing.) Please provide description of the non-cash donation

I understand that money received pursuant to an agreement that requires matching funds, expenditure reporting, and/or return of funds not spent within a specific period constitutes a grant, not a donation. I hereby certify that there is no agreement for matching funds, expenditure reporting, or return of funds in regard to this donation.

APPROVAL: Site Administrator _____ Date: _____

Please retain copies of all documentation, including letters from donors, related to the donation at the site as evidence that the donation has been spent in accordance with the donor's intent.

Local District/Central Office Approvals

Amount	Reviewed By	Signature	Date
Any	Fiscal Specialist	_____	_____
\$5,001 to \$15,000	Fiscal Services Mgr	_____	_____
\$15,001 to \$20,000	Deputy Controller	_____	_____
\$20,001 and above	Controller	_____	_____