

SEGUIN INDEPENDENT SCHOOL DISTRICT
Donation Contact Form

Please complete the following request for information for potential equipment donations to Seguin Independent School District.

Donor Information (please print)

Last Name: _____ First Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Please identify the type of donation: _____

Campus Information

Campus: _____

Campus Contact Name: _____

Campus Contact: Extension: _____

Please fax or email this form to the Risk Manager

Jennifer Raske
(830) 401-8621
jraske@sequin.k12.tx.us
Fax: (830) 379-3689

SEGUIN INDEPENDENT SCHOOL DISTRICT
Receipt for Donated Goods

The Seguin Independent School District acknowledges the receipt of your valuable contribution to our organization. Please identify the type of donation you are making by choosing from the following categories:

____ Technology Equipment

____ Books/Records/Tapes

____ Furniture

____ Machinery

____ Other (please identify) _____

Date: _____

Authorized Representative of SISD

Fair Market Value* \$ _____
(not to be completed by SISD)

**Valuation of donated property is the responsibility of the donor. Please refer to Internal Revenue Service Publication 561, Determining the Value of Donated Property. This form may be used to document your contribution. Seguin ISD is a non-profit organization and all donations are tax deductible. We have not provided goods and/or services in consideration for your donation.*

Your contribution is greatly appreciated and will assist us in providing a quality education to the students of Seguin Independent School District.

Please provide us with the following information (please print):

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

____ I wish for my donation to remain anonymous. (Check if applicable)