



Escondido Union High School District

District Service Center

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Donation Form

Date: _____

Organization Name: _____

Organization Address: _____

Phone Number: _____ Email: _____

Please list the EUHSD Site/Group/Organization/Department that the donation was given to:

List of Donation(s):

<u>QUANTITY</u>	<u>DESCRIPTION</u>	<u>CONDITION</u> (New or Used)	<u>MONETARY</u> <u>AMOUNT</u>

Site/Department Contact: _____

Site/Department Signature: _____

Director of Purchasing Signature: _____

Governing Board Approval Date: _____