



1221 E. Kingsbury Street
Seguin, TX 78155
Phone 830.401.8655
Fax 830.379.3689

Department of Business Services

Acknowledgement of Unsolicited Monetary Donation

Seguin Independent School District greatly appreciates the support of:

Name of Contributor/Organization: _____

Address: _____

Contact Name/Phone Number: _____

Contact Email Address: _____

through the monetary contribution of \$ _____

(cash, check, money order, cashier's check, gift cards, gift certificates, other)

which shall be used for the purpose of: _____

The amount reported to the IRS is the responsibility of the contributor and not the District.

No goods or services were provided in exchange for your contribution.

This support will assist the District in continuing to improve the educational environment.

Name of District Employee receiving contribution: _____

Campus or Department: _____

Signature: _____

Date Contribution Received: _____

District Board policy [CDC \(Local\)](#) states "...any (unsolicited) gift that the potential donor has expressly made conditional upon the District's use for a specified purpose, or any gift of real property, shall require Board approval." The district may not receive any gift that would violate or conflict with policies of or actions by the Board or with federal or state law. The district may receive gifts contributed for public purposes but not to benefit an individual. Once accepted, these gifts become the sole property of the District.