

# GIFT DECLARATION FORM



**Escalon Unified**  
School District  
Cultivating our community. Growing our future.

## Part A - Cash Donation

Please make check payable to school or EUSD (Note: Each school is legally part of EUSD)

Donation from: UNIVERSITY OF PITZENIX I would like my gift to be used as follows:

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

Amount \$ \_\_\_\_\_

On behalf of \_\_\_\_\_ School

Or \_\_\_\_\_ Program

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

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

City/State/Zip \_\_\_\_\_

Scholarship Funds \_\_\_\_\_  
Field Trip Funds \_\_\_\_\_  
Athletic Equipment \_\_\_\_\_  
Computers and Software \_\_\_\_\_  
Musical Instruments \_\_\_\_\_  
Art Supplies \_\_\_\_\_  
Library Books \_\_\_\_\_  
Principal's Discretion \_\_\_\_\_  
Other \_\_\_\_\_

If "Other" please specify \_\_\_\_\_

## Part B - Donation Other Than Cash

I / we wish to donate HIGH-FIDELITY HUMAN SIMULATORS (4), 2 HOSPITAL BEDS  
to ESCALON HIGH School, valued at \$ 200,000

This value was determined by me (us), not Escalon Unified School District.

Name JENNIFER MILLAR

Address 3613 BROOKLINE ST.

City/State/Zip MODESTO, CA 95356

\*\*\*DISTRICT USE ONLY\*\*\*

Receipt verified by (Site Administrator)

Name \_\_\_\_\_

Title \_\_\_\_\_

Technology Gift Reviewed by Information  
Systems \_\_\_\_\_  
(Name)

### Business Office Use Only (SACS)

Fund - Resources - Yr- Goal - Function - Site - Mgmt

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