

DOUGLAS COUNTY
Tax ID# 88-600031
DONATION ACCEPTANCE FORM

Name of Donor: _____

Address: _____ City: _____ State: _____ Zip: _____

Description of donation¹: _____

Donor estimate of current value: _____

Potential immediate or initial acquisition or installation cost, any on-going maintenance or replacement cost: _____

Intended use²: _____

Conditions of acceptance or donor designation: _____

Remarks: No Goods or Services were provided by the County in exchange for the donation

County Department and County Representative receiving donation: _____

Deposit Account Code: _____

APPROVED / DISAPPROVED

Date

Department Head/Elected Official Signature

Date

Chief Financial Officer Signature (if needed)

Date Submitted to BOCC

Date Approved by BOCC (if needed)

Note 1: Douglas County cannot guarantee future funding for repair, maintenance, use or replacement of donated items.

Note 2: A budget augment and BOCC resolution/ approval is required in order to *spend* donated funds. Budget Augment form: http://intranet/resources/finance/BudgetAugmentRequestForm_11.24.21.xlsx

Form Routing: Original to Records Management

cc: Board of County Commissioners, Finance Department, Receiving Department