

N. Donation Form

Member # _____

District Donation Form

When making monetary or property donations this form documents your contribution. Please complete and return this form to the District Administration Office.

Hérons Glen Recreation District may accept donations for purposes that will help the District further fulfill its mission. Decisions on the acceptance or refusal shall be made by the General Manger. Management is responsible for issuing donation receipts and acknowledgments. Only a memorial bench may have markings and all such markings are subject to District approval. No other donation or memorial may be marked in any way.

Donor's Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Monetary Donation: _____

Memorial Tree(s)/Palm(s)*: Select from GM plan designating location and types of plantings.

Memorial Bench*: Select from GM plan showing the location and styles available for benches.

Other: Designate the desired area where funds are requested to be spent or accumulated.

* Cost of tree includes leaf for Tree of Life plaque. Cost of bench includes personalized plaque. Please provide details (plaque will be no more than 8 inches by 3 inches, with a 3-line maximum).

Property Donation: GM may consult with committee(s) before accepting donations.

Description of item: _____

Estimated Fair Market Value of the item shown in the donation above. _____

GM's signature signifying acceptance of the donation: _____

All donations are the property of District. The District accepts no responsibility for the replacement and may move or remove items as needed. The timing for the installation of your donation is at the discretion of GM. Weather, delivery times, and work schedules all may influence the installation timing.

The District will issue receipts for gifts to donors.

Signature: _____ Date: _____

Thank you so much for supporting the District with your donation.

Adopted at the June 6, 2024 April 2023 District Board Meeting

For District staff use:

Actual Location of Donated Item: _____

Date Ordered: _____

Date Received: _____

Date Installed: _____

Amount of Deposit \$ _____

Actual Final Cost (including leaf or plaque for memorials) \$ _____

Date Paid: _____

District Staff Member Overseeing the Donation Position _____

__Accounting
01/31/2023

__Activities __HOA

Form Creation Date: