

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	Oldham County High School
School Address:	1150 N Hwy 393
	LaGrange, KY 40031

RECEIPT #

Fiscal Year Ending:

Date of gift: 12/3/25

School Federal ID #

Donor Name: Charles Schuab / Rhonda Spears

Donor Address: 15103 Sycamore Falls Dr		
street address		
street address (continued)		
Louisville	Ky	40245
city	state	zip code

Donor Phone Number:

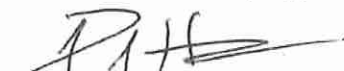
Type of donation: (Circle one)	Cash	<input checked="" type="radio"/> Check	Amount: 3000	Other
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Other gift description including purpose and restrictions on donation: Program Needs for Boys Basketball
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Was anything of value received in exchange for donation?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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If yes, description and dollar value:
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Donors Federal ID # (if applicable)



Person accepting donation

1/16/2024

Date



Principal

Date

***Tech Dept/Facilities**

Date

***Superintendent**

Date

*Per Redbook (page 12, #4): Form shall be filled out for all donations valued at \$250 or more

*Per Redbook (page 9, # 16): All Grant monies must be deposited at the board level

*OCBE Policy 3003: Donations greater than \$2,000 must be approved by Superintendent prior to deposit, once approved donations may be deposited into the desired EPES Student Activity Account or F21 Account.

*OCBE Policy 3003: Donations involving Technology or changes to School Facilities (indoor/outdoor) must submit a proposal to those departments in advance of accepting the donation.

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School: <u>070-OCMS</u>
School Address: <u>4305 Brown Blvd.</u>
<u>LaGrange, KY 40031</u>

RECEIPT #

Fiscal Year Ending: 2026

Date of gift:

School Federal ID # 61-6001306

Donor Name: OCMS 360, Inc.Donor Address: 4305 Brown Blvd.
street address

street address (continued)

LaGrange
cityKY
state40031
zip code

Donor Phone Number:

Type of donation: (Circle one) Cash ☐ Check ☒ Amount: \$4,152.50 Other

Other gift description including purpose and restrictions on donation:

For BAND

Was anything of value received in exchange for donation?

Yes ☐No ☒

If yes, description and dollar value:

Donors Federal ID # (if applicable)

47-4869668Jane Bowman
Person accepting donation1-12-26
Date[Signature]
Principal1/12/26
Date

*Tech Dept/Facilities

Date

*Superintendent

Date

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SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School: <u>SOUTH OLDHAM HIGH SCHOOL</u>	RECEIPT # <u>52601</u>
School Address: <u>5901 VETERANS MEMORIAL PKWY</u> <u>CRESTWOOD KY 40014</u>	Fiscal Year Ending: <u>2026</u>
Date of gift: <u>12-5-25</u>	School Federal ID # <u>61-6001306</u>

Donor Name: <u>South Oldham Rotary</u>
Donor Address: <u>P.O. Box 391</u> <small>street address</small>
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <u>Crestwood</u> <small>city</small> </div> <div style="width: 20%;"> <u>KY</u> <small>state</small> </div> <div style="width: 30%;"> <u>40014</u> <small>zip code</small> </div> </div>

Donor Phone Number:

Type of donation: (Circle one)	Cash	<input checked="" type="radio"/> Check	Amount: <u>\$1256</u>	Other
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Other gift description including purpose and restrictions on donation: <u>Indigent fund - however needed</u>

Was anything of value received in exchange for donation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If yes, description and dollar value: <u>NO</u>
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Donors Federal ID # (if applicable)	<div style="border: 1px solid black; height: 20px;"></div>
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<u>Melissa Woosen</u> Person accepting donation	<u>12-5-25</u> Date	<u>Melissa Woosen</u> Principal	<u>12-5-25</u> Date
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*Tech Dept/Facilities _____ Date	*Board Approval _____ Date
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*Per Redbook (page 12, #4): Form shall be filled out for all donations valued at \$250 or more

*Per Redbook (page 9, # 16): All Grant monies must be deposited at the board level

*KSBA Policy: Donations greater than \$1,000 must be approved by the school board. Scan form to Jane Easton.

*Donations involving Technology or changes to School Facilities (indoor/outdoor) must submit a proposal to those departments in advance of accepting the donation.

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	Oldham County High School
School Address:	1150 N Hwy 393
	LaGrange, KY 40031

RECEIPT #

Fiscal Year Ending:	5425/26
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Date of gift:	1/7/26
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School Federal ID #

Donor Name:	OCAB
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Donor Address:		
street address		
street address (continued)		
city	state	zip code

Donor Phone Number:

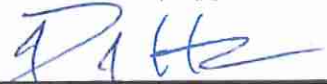
Type of donation: (Circle one)	Cash	<input checked="" type="radio"/> Check	Amount: \$1550	Other
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Other gift description including purpose and restrictions on donation:
Move money to school account Boys Basketball

Was anything of value received in exchange for donation?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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If yes, description and dollar value:

Donors Federal ID # (if applicable)	
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1/7/24
 Person accepting donation Date


1/8/24
 Principal Date

*Tech Dept/Facilities Date

*Superintendent Date

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SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	Oldham County High School
School Address:	1150 N Hwy 393
	LaGrange, KY 40031

RECEIPT #

Fiscal Year Ending:	SY 25/26
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Date of gift:	1/7/26
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School Federal ID #

Donor Name:	OCAFB
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Donor Address:		
street address		
street address (continued)		
city	state	zip code

Donor Phone Number:

Type of donation: (Circle one)	Cash	<u>Check</u>	Amount: \$5000	Other
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Other gift description including purpose and restrictions on donation:
Move money to school account
Athletics for uniform rotation

Was anything of value received in exchange for donation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If yes, description and dollar value:

Donors Federal ID # (if applicable)

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Person accepting donation

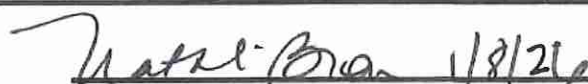
Date



1/7/26

Principal

Date



1/8/26

*Tech Dept/Facilities

Date

*Superintendent

Date

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SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	Oldham County High School
School Address:	1150 N Hwy 393
	LaGrange, KY 40031

RECEIPT #

Fiscal Year Ending: 5/25/26

Date of gift: 1/7/26

School Federal ID #

Donor Name: OLAB

Donor Address:		
street address		
street address (continued)		
city	state	zip code

Donor Phone Number:

Type of donation: (Circle one)	Cash	Check	Amount: \$11,478.66	Other
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Other gift description including purpose and restrictions on donation: Moving Money to school account Cheer
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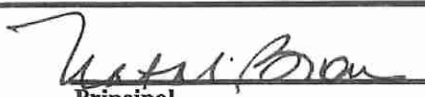
Was anything of value received in exchange for donation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If yes, description and dollar value:

Donors Federal ID # (if applicable)

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1/7/26
 Person accepting donation Date


1/8/26
 Principal Date

*Tech Dept/Facilities Date

*Superintendent Date

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