

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

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

RECEIPT #

Fiscal Year Ending: SY25/26

Date of gift: 5-15-26

School Federal ID #

Donor Name: Oldham County Band Boosters

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

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$15,000.00 Other

Other gift description including purpose and restrictions on donation:
To Support band

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Donors Federal ID # (if applicable)

Dan Klipper 5-15-26
Person accepting donation Date

[Signature] 5/18/26
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: NOHS
School Address: 1815 S Hwy 1793
GOSHEN, KY 40026

RECEIPT # 19374

Fiscal Year Ending: 6/30/2024

School Federal ID #

Date of gift: 8/13/25

Donor Name: NOHS BOOSTERS

Donor Address: 1815 S Hwy 1793
street address
street address (continued)
GOSHEN KY 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: 6710.23 Other

Other gift description including purpose and restrictions on donation: \$866.00 Baseball
Athletics General 15944.23 Athletics

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Matt Valey
Person accepting donation

[Signature]
Principal

8/14/25
Date

8/14/25
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S HWY 1793
GOSHEN, KY 40026

RECEIPT # 19376

Fiscal Year Ending: 6/30/2026

School Federal ID #

Date of gift: 8/13/25

Donor Name: NOHS BOOSTERS

Donor Address: 1815 S HWY 1793
street address
street address (continued)
GOSHEN KY 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: 8043.20 Other

Other gift description including purpose and restrictions on donation:
MEUS BASKETBALL

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Matt Wooley

Person accepting donation

8/14/25

Date

[Signature]

Principal

8/14/25

Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	North Oldham High School
School Address:	
	1815 S Highway 1793 Goshen KY 40026

RECEIPT #	19428
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Fiscal Year Ending:	6/30/2026
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School Federal ID #	61-6001306
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Date of gift:	9/2/2025
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Donor Name:	North Oldham High School Athletics
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Donor Address:	1815 S Highway 1793		
	street address		
	street address (continued)		
	Goshen KY 40026		
	city	state	zip code

Donor Phone Number:	
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Type of donation: (Circle one)	Cash	Check	Amount: 1000.00	Other
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Other gift description including purpose and restrictions on donation:	Boy Lacrosse - no restrictions
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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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Federal ID # (if applicable)	
Person accepting donation	Principal
Date	Date

Matt Levy *[Signature]*
 9/2/25 9/2/25

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: North Oldham High School
School Address:
1815 S Highway 1793 Goshen KY 40026

RECEIPT # 19432

Fiscal Year Ending: 6/30/2026

School Federal ID # 61-6001306

Date of gift: 9/4/2025

Donor Name: North Oldham High School Athletics

Donor Address: 1815 S Highway 1793
street address
street address (continued)
Goshen KY 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$1,368.00 Other

Other gift description including purpose and restrictions on donation:
Boy Lacrosse - \$1000.00 - no restriction
Girls Golf \$2500.00 - no restrictions
Girls Volleyball \$2500.00 - no restrictions
Boys Golf \$5368.00 - no restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Person accepting donation

Principal

Date

Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	North Oldham High School
School Address:	
	1815 S Highway 1793 Goshen KY 40026

RECEIPT #	19611
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Fiscal Year Ending:	6/30/2026
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School Federal ID #	61-6001306
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Date of gift:	11/4/2025
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Donor Name:	North ^{Oldham} Oldham Athletic Boosters
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Donor Address:	1815 S Highway 1793
	street address
	street address (continued)
	Goshen KUY 40026
	city state zip code

Donor Phone Number:	
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Type of donation: (Circle one)	Cash	<input checked="" type="radio"/> Check	Amount: 2831.07	Other
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Other gift description including purpose and restrictions on donation:
Boys Basketball - no restrictions

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:

Federal ID # (if applicable)	
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Person accepting donation

Principal

11/6/25

11/6/25

Date

Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S. Hwy 1793
Cosheim KY 40024

RECEIPT # 19689

Fiscal Year Ending: 6/30/2026 FY26

School Federal ID # ~~12345~~

Date of gift: 12/9/25

Donor Name: Band Boosters

Donor Address: 1815 S Hwy 1793
street address
Cosheim KY 40024
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$3000 Other

Other gift description including purpose and restrictions on donation:
No restrictions, but must be marching band

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Will Bulby
Person accepting donation

Ma 198
Principal

12/9/25
Date

12/9/25
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S. Hwy 1793
GOSHEN, KY 40026

RECEIPT # 19743

Fiscal Year Ending: FY26 4/30/2026

School Federal ID #

Date of gift: 1/5/26

Donor Name: NOHS BOOSTERS

Donor Address: 1815 S Hwy 1793
street address
street address (continued)
Goshen KY 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$21,500 Other

Other gift description including purpose and restrictions on donation:
UNIFORMS

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Matt Walsh
Person accepting donation

[Signature]
Principal

1/5/26
Date

1/5/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S Hwy 1793
Goshen IN 40826

RECEIPT # 19748

Fiscal Year Ending: 6/30/2026

School Federal ID #

Date of gift: 1/7/26

Donor Name: North Oldham Band Boosters

Donor Address: 1815 Hwy 1793
street address
street address (continued)
Goshen IN 40826
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: Other 1500

Other gift description including purpose and restrictions on donation:
for anything marching band

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

And D. Bell
Person accepting donation

[Signature]
Principal

1/8/26
Date

1/8/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S Hwy 1793
Goshen KY 40026

RECEIPT # 19748

Fiscal Year Ending: 6/30/2026

School Federal ID #

Date of gift: 1/7/26

Donor Name: North Oldham Band Boosters

Donor Address: 1815 S Hwy 1793
street address
street address (continued)
Goshen KY 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$663 Other

Other gift description including purpose and restrictions on donation:
For band related expenses

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

[Signature]
Person accepting donation

[Signature]
Principal

1/8/26
Date

1/8/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1715 S. Hwy 1793
GOSHEN, KY 40026

RECEIPT # 19774

Fiscal Year Ending: FY26 10/30/2026

School Federal ID #

Date of gift: 1/12/26

Donor Name: 8TH REGION A.S. ASSOC.

Donor Address: 2340 Hwy 22 E.
street address

street address (continued)
OWENTON KY 40359
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: 1335⁰⁰ Other

Other gift description including purpose and restrictions on donation:
8TH REGION SOCCER TOURNAMENT PROCEEDS

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Person accepting donation Matt Way

Principal [Signature]

Date 1/14/26

Date 1/14/26

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S. Hwy 1793
Goshen, Ky 40026

RECEIPT # 19808

Fiscal Year Ending: 6/30/2026

School Federal ID #

Date of gift: 2/3/26

Donor Name: North Olkham Band Boosters

Donor Address: 1815 S. Hwy 1793
street address
street address (continued)
Goshen Ky 40026
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$5000 Other

Other gift description including purpose and restrictions on donation:
Marching Band - no other restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Andi Bellz
Person accepting donation

[Signature]
Principal

2/3/26
Date

2/3/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School:	North Oldham High School
School Address:	
	1815 S Highway 1793 Goshen KY 40026

RECEIPT #	19811
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Fiscal Year Ending:	6/30/2026
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School Federal ID #	61-6001306
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Date of gift:	2/3/2026
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Donor Name:	North Oldham Athletic Boosters
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Donor Address:	1815 S Highway 1793
	street address
	street address (continued)
	Goshen KY 40026
	city state zip code

Donor Phone Number:	
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Type of donation: (Circle one)	Cash	<u>Check</u>	Amount: 1250.00	Other
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Other gift description including purpose and restrictions on donation:
Archery - Banners -

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:

Federal ID # (if applicable)	
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Matt Way
Person accepting donation

2/3/26
Date

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[Signature]
Principal

2/3/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S Hwy 1793
Goshen Ky 40026

RECEIPT # 19864

Fiscal Year Ending: 6/30/2026

School Federal ID #

Date of gift: 2/27/2026

Donor Name: Nick Pfeffeir

Donor Address: 10928 Worthington Lane
street address

street address (continued)
Prospect Ky 40059
city state zip code

Donor Phone Number: 502-235-5795

Type of donation: (Circle one) Cash Check Amount: \$10,000⁰⁰ Other

Other gift description including purpose and restrictions on donation: No restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

BA PA

Person accepting donation

2/27/2026

Date

[Signature]

Principal

3/2/26

Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NJOHS

RECEIPT # 19928

School Address:

1815 S Highway 1793 40026

Fiscal Year Ending: 6/30/2024

School Federal ID # 01-600304

Date of gift: 3/19/26

Donor Name: Metro Area Athletics Directors

Donor Address: PO Box 35254
street address
Louisville KY 40232
street address (continued)
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: 2373.79 Other

Other gift description including purpose and restrictions on donation:
Athletics- no restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

Matt Walsh
Person accepting donation

[Signature]
Principal

3/20/26
Date

3/20/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION ACKNOWLEDGEMENT FORM

School: NOHS
School Address: 1815 S Hwy 1793
Goshen KY 40040

RECEIPT # 20038

Fiscal Year Ending: 6/30/2016

School Federal ID #

Date of gift: 5/15/26

Donor Name: North Oldham Band Boosters

Donor Address: 1815 S Hwy 1793
street address
street address (continued)
Goshen KY 40040
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: 1157.61 Other

Other gift description including purpose and restrictions on donation:
No restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Federal ID # (if applicable)

[Signature]
Person accepting donation

5/15/26
Date

[Redacted]

[Signature]
Principal

5/15/26
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND DONATION ACKNOWLEDGEMENT FORM

School: SOUTH OLDHAM HIGH SCHOOL

RECEIPT # 52969

School Address: 5901 VETERANS MEMORIAL PKWY
CRESTWOOD KY 40014

Fiscal Year Ending: 2026

Date of gift: 5-19-26

School Federal ID # 61-6001306

Donor Name: SOHS Athletic Boosters

Ath Gen *60000
B Basketball *2000
B Golf *5000
volleyball *500

Donor Address: 5901 Veterans Memorial Pkwy
street address
street address (continued)
Crestwood KY 40014
city state zip code

Donor Phone Number:

#2869

Type of donation: (Circle one) Cash Check Amount: 67500 Other

Other gift description including purpose and restrictions on donation:
specific teams

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:
NA

Donors Federal ID # (if applicable)

Kimberly Jordan 5/19/2026
Person accepting donation Date

UNUSIM WOODS 5/19/26
Principal Date

*Tech Dept/Facilities Date

*Board Approval 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
*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:	OCMS - 070
School Address:	4305 Brown Blvd.
	LaGrange, KY 40031

RECEIPT #

Fiscal Year Ending:	2026
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Date of gift:	5/22/2026
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School Federal ID #	61-6001306
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Donor Name:	OCMS 360 Inc
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Donor Address:	4305 Brown Blvd	
	street address	
	street address (continued)	
LaGrange	KY	40031
city	state	zip code

Donor Phone Number:

Type of donation: (Circle one)	Cash	Check	Amount:	\$8,562.50	Band Donation
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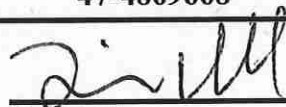
Other gift description including purpose and restrictions on donation:	For OCMS Boys Soccer Team
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Was anything of value received in exchange for donation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If yes, description and dollar value:

Donors Federal ID # (if applicable)	47-4869668
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 _____
 Person accepting donation Date
5/22/2026

 _____
 Principal Date
5/22/2026

 *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: NOTTS
School Address:
1815 S Hwy 1793 Gaskens

RECEIPT # 20060

Fiscal Year Ending: 6/30/2004

School Federal ID #

Date of gift: 5/26/26

Donor Name: Oldham Co Fiscal Court

Donor Address: 100 W. Jefferson St.
street address
Suite 4
street address (continued)
LaGrange GA 30240
city state zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$1100 Other

Other gift description including purpose and restrictions on donation:
No restrictions

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:
trash pick-up

Federal ID # (if applicable)

Carl D. Bullock
Person accepting donation

[Signature]
Principal

5/26/26
Date

5/26/06
Date

*Form shall be filled out for all donations valued at \$250 or more

SCHOOL ACTIVITY FUND
DONATION **ACKNOWLEDGEMENT** FORM

Fiscal Year Ending: 2026

RECEIPT#: N/A

School: Oldham County Preschool

Address: 4309 Brown Blvd
LaGrange KY 40039
City State Zip

School Federal ID #: 616001306

Date of Gift: 5/27/26

Donor Name: Raymond and Irene Wilborn Charitable Foundation

Donor Address: 2102 Ashcraft Ln.
Louisville KY 40242
City State Zip

Donor Phone Number: _____

Type of donation: (Check one) Cash Check

Amount: 3,000.00 Other: ~~#~~ 2266

Gift description including purpose and restrictions on donation:

Teacher and staff supplies (#1,000.00).
Classroom Instructional Supplies (#2,000.00).

Was anything of value received in exchange for donation? Yes No

If yes, give description and dollar value:

Federal ID# (if applicable): _____

Irisia Chalfant
Person accepting donation

Jenica Kausten
Principal

Superintendent (if required) _____

5/27/26
Date

*Per Redbook (page 12, #4): Form required for all donations valued at \$250 or more.
*Per Redbook (page 9, #16): All GRANT monies must be deposited at the board level.
*Policy 3003: Donations greater than \$2000 must be approved by the Superintendent prior to deposit
*Policy 3003: If a donation involves Technology or changes to the School Facility (indoor/outdoor), the proposal MUST be submitted to the Technology Dept. or Facilities Dept. 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: SY25/26

Date of gift: 5-27-26

School Federal ID # 61-6001306

Donor Name: Turning Wrenches

Donor Address:	1304 English Station		
	street address		
	street address (continued)		
	Louisville	KY	40223-8999
	city	state	zip code

Donor Phone Number:

Type of donation: (Circle one) Cash Check Amount: \$1000.00 Other

Other gift description including purpose and restrictions on donation:
Archery Program

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:

Donors Federal ID # (if applicable)

Paul Hollen 5-27-26
Person accepting donation Date

Wesley Brown 5/28/26
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: EOMS
School Address:

RECEIPT # 7193

Fiscal Year Ending: FY: 2026

Date of gift: 5/28/26

School Federal ID # 61-6001306

Donor Name: INFINITY ENTERPRISES (MAJOR FUND)

Donor Address: 2011 CROOKED CREEK CT
street address
1
street address (continued)
CRESTWOOD KY 40014
city state zip code

Donor Phone Number: 502-939-0905

CK # 1272

Type of donation: (Circle one) Cash Check Amount: 1,000 Other

Other gift description including purpose and restrictions on donation:
COUNTY SCRIMMAGE SPONSORSHIP

Was anything of value received in exchange for donation? Yes No

If yes, description and dollar value:
SIGNAGE \$40.00

Donors Federal ID # (if applicable)

[Signature] 5/28/26
Person accepting donation Date

[Signature] 5-29-26
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 F22 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.

