Attachment A

City of Dripping Springs Donation Form

Date Form Completed: 09.29.2020

Name of Donor: Denise Ranck Address of Donor: 700 Grand Prairie Circle

Name of Donor's Representative (if different than Donor):

Phone Number of Donor: 512-694-0119

Email Address of Donor: Deniseranck@g-mail.com

Project for which Donation is made: Memorial Bench at Founders Park

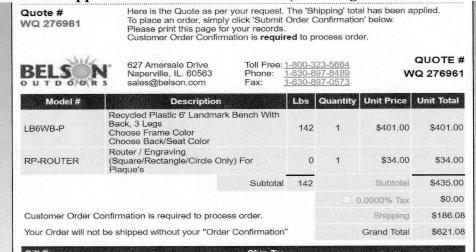
Is this a Donation of: Labor/In-Kind Services? Cash? ____ Materials? ____ Other? Memorial Bench

State the estimated completion date of project: 11.30.2020

Description of Donation:



Actual or Approximate Value of Donation (including cost of materials and time):\$621.08



Materials

& Staff Time for Install

Method value was determined (e.g., actual, retail/wholesale, appraisal, fair market value, other): Retail
Printed Name of Donor's Authorized Signee: <u>Denise Ranck</u> Title of Authorized Signee: N/a Signature of Authorized Signee:
City Use Only:
Donation Agreement Required:YesNo
City Administrator Approval:YesNo
Commission/Board Approval:Yes No
City Council Approval:YesNo
ACCEPTED ON BEHALF OF THE CITY://
have