Attachment A

City of Dripping Springs
Donation Form

Date Form Completed: 11/22/20

Name of Donor: Alexander Seshan **Address of Donor: 324 Sand Hills Ln.**

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

Phone Number of Donor: 512-917-1072 **Email Address of Donor: alexander.seshan@outlook.com**

Project for which Donation is made: Eagle Scout Project

Is this a Donation of: Labor/In-Kind Services? Cash? _____ Materials?_____ Other? A chimney swift tower built

State the estimated completion date of project: Late March Early April

Description of Donation: A Chimney

Actual or Approximate Value of Donation (including cost of materials and time): Around 1000$ and at least 150 hours of time.

Method value was determined (e.g., actual, retail/wholesale, appraisal, fair market value, other): Home Depot Prices

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Printed Name of Donor's Authorized Signee: _____Alexander Seshan_____
Title of Authorized Signee: _____Life Scout_____
Signature of Authorized Signee: Alexander Seshan
Date Signed: __11__/__22__/__20__

City Use Only:
Donation Agreement Required: _____Yes ____No
City Administrator Approval: ___Yes ___No
Commission/Board Approval: ____Yes ____ No
City Council Approval: ___Yes ___No
ACCEPTED ON BEHALF OF THE CITY: ____/____/____
by: _____