APPLICATION FOR PARK DONATION



Donor Name: Vi Pomeroy	SCONSIN
Phone Number: (920)427-5566	
Address: 1806 Florence St. Kaukauna Wi	
Email Address: lpomy5566@gmail.com	
Proposed Location: Strassburg Park Kaukauna WI	
Type of Donation:	
Cambridge Bench Picnic Table Tree Book Exchange Garbage Recepta Other Item (Please Describe)	acle
Inscription Text (If Applicable)	
Donated in Honor of Ken & Vi pomeroy	
Please attach any necessary photos or documents with this form Park Donations to the City of Kaukauna are considered outright and unrestricted guarantee the permanency of the accepted donation. If a memorial must be relocated to the control of the accepted donation.	
notify the donor in writing at the address shown on this form. Donations may be to accountant). The donor declares to have read the Parks Donation Policy and Guide with the conditions set forth in this policy and agrees to any conditions required by	ax deductible (please consult an lines. The donor understands and agrees
By signing below, I acknowledge that I have read and understand the Parks Donation Policy and Guidelines	
Pon	neroy

CITY OF KAUKAUNA

144 W 2nd Street Kaukauna, WI 54130 920.766.6300 www.cityofkaukauna.com