

**CHINO VALLEY UNIFIED SCHOOL DISTRICT**  
*Associated Student Body*  
*Student Donations*

School Name	Date
Club/Account	Advisor
Item Donated	Cost

No.	Student Name	Student Signature	Date Received	Reason
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

**NOTE:** Donations are discouraged as ASB funds are to be used on students as a whole and not individuals. Use separate sheet for separate items.

Distribution: WHITE - Business Office/Finance Clerk YELLOW - Club File
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