

_____ CONSERVATION DISTRICT

VALUE OF DONATED MATERIAL

RETAIN FOR AUDIT

PROJECT NAME AND NUMBER

CONSERVATION DISTRICT

DONOR

DATE	DESCRIPTION OF MATERIAL DONATED	FAIR VALUE	BASIS OF VALUE
	TOTAL VALUE OF DONATIONS		

VERIFYING OFFICIAL SIGNATURE

DATE

PLEASE SUBMIT TO:
DCNR - CONSERVATION DISTRICT PROGRAM
BRE@DCNR.NV.GOV
Fax# 775-684-2715