

Date: _____

PROPOSED GIFT TO HARRIS COUNTY, TEXAS

DEPARTMENT ACCEPTING GIFT AND SUBMITTING REQUEST TO COMMISSIONERS COURT

Department Name	Fund	Department #

DEPARTMENT RETAINING GIFT UPON COMMISSIONERS COURT APPROVAL (IF DIFFERENT FROM ABOVE DEPARTMENT)

Department Name	Fund	Department #

Gift Description*

\$ _____
Total Dollar Amount or Estimated Market Value*

Name of Donor(s)

***NOTE:** If there are no restrictions, please indicate. If more space is required, please identify or summarize above and indicate that there is an attachment.

Special Purposes/Restrictions:

NOTE: If there are no restrictions, please indicate. If more space is required, please identify or summarize above and indicate that there is an attachment.

Accepted:

Harris County, Texas

By: _____

Per Commissioners Court Order: Volume _____ Page _____ Date _____