

Date: \_\_\_\_\_

## PROPOSED GIFT TO HARRIS COUNTY, TEXAS

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**DEPARTMENT ACCEPTING GIFT AND SUBMITTING REQUEST TO COMMISSIONERS COURT**

Department Name	Fund	Department #

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

Department Name	Fund	Department #

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\_\_\_\_\_  
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.

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**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.

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Accepted:

Harris County, Texas

By: \_\_\_\_\_

Per Commissioners Court Order:      Volume \_\_\_\_\_ Page \_\_\_\_\_ Date \_\_\_\_\_