CITY OF FONTANA COMMUNITY SERVICES DEPARTMENT

DONATION ACCEPTANCE

	(For All Donations)					
Name of Donor/Organizat Adam Perez	ion:	·				
Address:						
3649 Mission Ine Ave. Fl 2n Riverside CA 92501	ad					
Contact Person, Title:		Phone No.				
Adam Perez		rnone No.				
Type of Donation: (Che	ck boxes)					
X Monetary	Amount \$	Receipt No.				
	\$1,000.00	1050605.002				
		(Attach Copy of Receipt)				
Goods/Services	Estimated Value \$	Description				
Intended use of Donation:						
Intended use of Donation: X Specific>	Description:					
X Specific ->	Description: 2025 Ve	eterans Day Celebration				
		eterans Day Celebration				
X Specific → General	2025 Ve	eterans Day Celebration Donor? (Required for ALL donations)				
X Specific → General X Thank you/acknown	2025 Ve	Donor? (Required for ALL donations)				
X Specific General X Thank you/acknow X Attach copy of acknow G.E.T. Online Done	whedgement letter sent to the ation Tracking Form Has B	Donor? (Required for ALL donations) is form. een Completed.				
X Specific General X Thank you/acknow X Attach copy of acknow G.E.T. Online Done	whedgement letter sent to the constraint of the	Donor? (Required for ALL donations) is form. een Completed.				
X Specific General X Thank you/acknow X Attach copy of acknow G.E.T. Online Done	whedgement letter sent to the ation Tracking Form Has B	Donor? (Required for ALL donations) is form. een Completed. er than \$500.00)				
X Specific General X Thank you/acknown Attach copy of acknown G.E.T. Online Done (Required for ALL) Received By: Diana Ambriz	whedgement letter sent to the ation Tracking Form Has B	Donor? (Required for ALL donations) is form. een Completed. er than \$500.00) Date:				
X Specific General X Thank you/acknown Attach copy of acknown G.E.T. Online Done (Required for ALL) Received By: Diana Ambriz	which general letter sent to the ation Tracking Form Has Bedonations with a value greater	Donor? (Required for ALL donations) is form. een Completed. er than \$500.00) Date: 0 16 2025				
X Specific General X Thank you/acknown Attach copy of acknown G.E.T. Online Done (Required for ALL) Received By: Diana Ambriz	whedgement letter sent to be action Tracking Form Has Be donations with a value greated sent to Supervisor/Manage	Donor? (Required for ALL donations) is form. een Completed. er than \$500.00) Date: 0 16 2025				

City of Fontana

8353 Sierra Avenue Fontana, CA 92335 Phone: (909) 349-6900

FAX: (909) 349-6911

Email: Recreation@fontanaca.gov

ADAM PEREZ FOR ASSEMBLY 2024 ADAM PEREZ FOR ASSEMBLY 2024 3649 MISSION INN AVE FL 2ND RIVERSIDE, CA 92501

Receipt #1050605.002

Nov 26, 2024 10:42 AM



Prepared By: csanchez Company ID: 207

Primary phone: (909) 999-9999, Secondary phone: --

Payment Summary

Check:

\$1,000.00 Check # 1100

Total Received:

\$1,000.00

Total Payments:

\$1,000.00

▼ Transactions							
Customer	Description	Item	Unit	Qty	Fee	Charge	
Adam Perez For Assembly 2024 3649 Mission Inn Ave FL	Events General Revolving #0168.301.FA24 Action: Enroll	General	Per Seat	1.00 \$1	,000.0	0 \$1,000.00	
2nd Riverside, CA 92501	Meets: From September 2, 2024 to December 31, 2024						
Primary phone: (909) 999- 9999 Email:	Location: Community Services Department office						
Email: ID: 56787							

Total Charges \$1,000.00 Total Payments \$1,000.00 \$0

Balance