

## DECLARATION OF DONATION COUNCIL APPROVAL

For County Council's approval consistent with Policy 1006 (Cash donations above \$5,000 total, annually; property donations above \$1,000 total, annually; testamentary donations.)

| accordance with i<br>possess on these | , irrevocably give, and where apple County to become permanent property of Sts established policies. I assign and transfer properties to Salt Lake County, without rest sions or restrictions." | Salt Lake County and to be a all rights, including any cop | dministered in<br>yrights that |
|---------------------------------------|---|--|--------------------------------|
| Description of dona                   | tion:   |  |                                |
| Donation to benefit                   | Meals on Wheels program   |  |                                |
|                                       |   |  |                                |
| Value (estimated by                   | the donor): \$10,000.00   |  |                                |
| Date of transfer of t                 | itle and delivery: 12/19/24   |  |                                |
| Other provisions or                   | restrictions: funds to be used for  |  |                                |
| Donor Name:                           | Katherine Elsnab  | Of glanus  |                                |
|                                       | Please Print  | Donor Signature  |                                |
| Donor Address:                        | 4507 Jefferson Ave, Odgen   | , <u>UT</u>  | 84403                          |
|                                       | Address   | State  | Zip                            |
| Kelly Colopy                          | Digitally signed by Kelly Colopy Date: 2025.01.13 18:10:31 -07'00'  |  |                                |
| Elec                                  | eted Official/Mayor or Designee   | Date   |                                |
|                                       | reby accepts the above donation under the condition makes no judgment as to the value of the Donation   |  | ition of                       |
| SALT LAKE COU                         | NTY COUNCIL:  |  |                                |
|                                       | Chair   |  | Date                           |
|                                       |   |  |                                |
| ATTEST:                               | County Clerk or Deputy County Clerk   |  |                                |

## Katie Elsnab

## Other details Recipient Katie Elsnab Phone Email 12/19/24, 2:54 pm Created Square Online Source Channel Salt Lake County Aging & Adult Services Receipt VSAW 2001 Government Center Location Address New (2) Meals on Wheels x 2

## Payment

Me

Subtotal

Total

Variation: Custom Amount

 American Express ★ 10,000.00

 12/19/24, 3:00 pm

 \$10,000.00

 Paid

\$10,000.00

\$10,000.00

\$10,000.00

Show more