FUNDRAISER/SALES PROJECT FORM FOR STUDENT ACTIVITY

School Year 2024-2025

"SIDE A"

| ORGANIZATION NAME:_ | | | | | | |
|-------------------------------|--|---|--|--|--|--|
| | CONTACT PERSON:PHONE: | | | | | |
| | PRESS: | | | | | |
| | | | | | | |
| PROPOSED FUNDRAISE | :R: | | | | | |
| | | | | | | |
| COST PER ITEM? \$ | PROPOSED SALE PRICE? \$ | ESTIMATED # ORDERED: | | | | |
| ELINDDAISED BEGINNIN | C DATE: | | | | | |
| | G DATE: | | | | | |
| FUNDRAISER COMPLET | ION DATE: | | | | | |
| LOCATION OF FUNDRAI | SER: | | | | | |
| | | | | | | |
| (FYI: IF THE FUNDRAISER IS ON | SCHOOL PROPERTY, A BUILDING USE REQUES | ST MUST ALSO BE COMPLETED ON FACILITRON.) | | | | |
| ADMISSION OR ENTRY I | FEE: | | | | | |
| | | | | | | |
| WILL STUDENTS BE PAR | RTICIPATING IN THE ACTIVITY? YE | S NO | | | | |
| ANY PROFIT GENERATE | ED FROM THIS FUNDRAISER WILL E | RE LISED FOR THE FOLLOWING: | | | | |
| ANTI NOTH CENTRAL | EDITION THO FORDINGER WILL E | DE GOED FOR THE FOLLOWING. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Building Principal Signatur | re: | Date: | | | | |
| Superintendent's Signature | e [.] | Date: | | | | |

Please fill out the front of this form (SIDE A) in its entirety and submit for approval. After the Superintendent signs it, we will keep a copy of this to be approved at the next Board meeting (if necessary) and send the original back to you. Please note: any fundraisers requiring that a vendor be paid MUST have a purchase order completed prior to the end of the fundraiser. Upon completion of the fundraiser, you must complete the back side of this form (SIDE B) and return for final signatures. The form will then be filed in the Central Office for review by the auditors at year end. Any questions, please call Darla Davis at 448-4930.

"SIDE B"

ONCE FUNDRAISER IS OVER, PLEASE COMPLETE "SIDE B", SIGN AND RETURN TO CENTRAL OFFICE:

| ACTUAL QTY ORDERED | DESCRIPTION OF ITEM | Cost Paid Per Item | Sale Price of Item |
|--------------------|---------------------|--------------------|--------------------|
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |

(If same as "estimated" on Side A, indicate same.)

SALES PROJECT BREAKDOWN

| DECEIDTS: (Actual | denocite from | project or fundraiser) | | |
|------------------------------|----------------|-------------------------|---------------|--|
| KECEIF 13. (Actual | deposits iroin | project or fundraiser) | | |
| <u>Date</u> | | | <u>Amount</u> | |
| | | | \$ | |
| | | | \$ \$ | |
| | | | \$ | |
| | | | \$ | |
| | | Total Project Deposits: | \$ | |
| EXPENSES: (Actua | l expense of p | roject or fundraiser) | | |
| <u>Date</u> <u>Purchased</u> | <u>From</u> | | <u>Amount</u> | |
| | | | \$ | |
| | | | \$ \$ | |
| | | | <u> </u> | |
| | | | \$ | |
| | | Total Project Expense: | \$ | |
| | | TOTAL PROFIT: | \$ | |
| Reason(s) for any dis | screpancies: | | | |
| | | | | |
| | | | | |
| | | | | |
| Advisor/Sponsor | Date | Building Principal | Date | |
| Superintendent | Date | _ | | |