

FUNDRAISER AUTHORIZATION

Proposed fundraising activity _____

Purpose of fundraiser _____

Fund/account name _____

Current balance of fund/account \$ _____ Date _____

Anticipated date(s) of fundraiser Beginning _____ Ending _____

Expected student involvement (schoolwide or specific school organization) _____

Margin of profit (if applicable) _____

Method by which school will receive profit _____

Requested by _____ Date _____

Name/Title

Approved by _____ Date _____

Principal

Approved by _____ Date _____

Director of Schools

FUNDRAISER SUMMARY REPORT

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Fundraising Activity _____

Fund/Account Name _____

Sponsor _____

Date(s) of Fundraiser _____

Authorized Purpose _____

Total Collections \$ _____

Less: Total Expenses \$ _____

Total Fundraiser Profit \$ _____

Total Purchases with Fundraiser Profit (from page 2) \$ _____

*Difference \$ _____

*If the amount spent is less than the profit, please provide explanation and intended disposition of balance. (The disposition of excess proceeds or a change in authorized purpose must be approved by the director of schools.)

Completed by _____ Date _____

Reviewed by _____ Date _____

Approved by _____ Date _____
Director of School