

# CUPERTINO HIGH SCHOOL ASB OFFICE

## REQUEST FOR FUNDRAISER

**NAME OF ORGANIZATION:**

Name student contact:

3rd pd room #

email:

phone:

**TYPE OF FUNDRAISER**

**NAME OF COMPANY/VENDOR**

**ADDRESS**

**WHAT IS BEING SOLD? (Be very specific)**

**IS IT ON CONSIGNMENT?**

**YES** \_\_\_\_\_

**NO** \_\_\_\_\_

*With the provision that the payment of the commodities is expected only upon completion of sales.*

**DATES OF FUNDRAISER\***

**FROM:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **TO:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Maximum of 4 weeks of selling period

\*Warning: Initiating fundraisers before the approval of BOTH legislative and executive council will result in a \$50.00 fine for the first offense, increasing in increments of \$25.00 every time thereafter.

**LOCATION OF FUNDRAISER:**

**ACCOUNT #**

**ACCOUNT BALANCE \$:**

**FOR WHAT PURPOSE WILL THE FUNDS RAISED BE USED?**

**REQUIRED SIGNATURES: (Must have all three signatures to be valid)**

X

(Club Advisor)

X

President of Organization

X

(Head of Fundraiser)

**NOTE:** In order to allow adequate time for processing, a fundraiser request MUST be submitted ONE MONTH prior to the starting date of the fundraiser, along with a "Profit and Loss Statement". Submit this form directly to the ASB office.

-----{For Office Use Only}-----

Date submitted to ASB Office:

Time submitted:

**APPROVED BY EXECUTIVE COUNCIL DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

ASB President Signature