Activity Fund Accounting Procedures
Information for Sponsors/Secretaries
Request for Fundraiser
Taxable Items

Date_____________________________________
Campus___________________________________
Organization_______________________________

1. Goals or Objectives for the Fundraising Project

____________________________________________________________________________________

2. Proposed Amount to be Raised  ________________________________________________________

3. Items to be Sold  ______________________________________________________________________

4. Percent profit to school  ______________________________________________________________

5. Unit Selling Price  ______________________________________________________________________

6. Name and Phone Number of Sales Company  ______________________________________________

7. Name and Phone Number of Salesman  __________________________________________________

8. Dates of Fundraiser  _____________________________________________________________________

9. In School Solicitation  YES   NO

10. Out of School Solicitation Only  YES   NO

11. Unsold Items are Returnable  YES   NO

12. Planned use of Funds_______________________________________________________________

____________________________________________________________________________________

I understand that my account will have 8.25% withdrawn from the activity account to pay for the taxes.

_______________________________________  ______________________________________
Signature of Sponsor  (Please Date)   Approval of Principal  (Please Date)

_____________________________________
Asst. Superintendent  (Please Date)