RELATIONS WITH PARENT ORGANIZATIONS		
REQUEST FOR APPROVAL OF FUND-RAISING ACTIVITY	(EXHIBIT)	
Organization:		
Booster club other school-support organization		
Parent-Teacher organization		
Name of the sponsoring organization:		
Name of the Sponsor:		
Campus		
Project		
Vendor		
Vendor's address:		
Name of representative		
Date of project	_	
Length of project		
Expected net profit		
Purpose /Benefit to the school or District		
Scope of solicitations		
Sponsor's signature Date		
Principal's signature Date	ua -	
Approved Denied		
DATE ISSUED: 11/11/2013 UPDATE 45 GE(EXHIBIT)-RRM	Page 1 of 1	

Ector County ISD 068901

RELATIONS WITH PARENTS OR PARENTS' ORGANIZATIONS

GE (EXHIBIT)A

FUND RAISER RECONCILIATION

INVENTORY:		-	
Beginning	g inventory	-	
	f items sold or serviced		
	f items returned to vendor	-	
	f items unaccounted for (attach explanation)		
Ending in			
	ventory		
SALES:		_	
	f items sold or serviced	-	
	ice per item	23-	
Total sale	-	(
Total exp	enditures		
Net profit		-	
Total sale	S *		
Less: nor	n-taxable sales		
Less: one	-day tax-free sales		
Net taxab			
	axable sales x .0825)		
		-	
Sponsor:		Date:	
Sponsor.	Signature (after form la completed)	Date:	
	Signature (after form Is completed)		
Principal:		Date:	
r morpan	Signature (after form is completed)	Dale.	
	orginature (alter form is completed)		

* If total sales include sales tax, divide total sales by 1.0825.

DATE ISSUED: 03/20/2019