

FUNDRAISER REQUEST

All Fundraisers must be submitted for approval to the ASB Bookkeeper 2 weeks prior to the Fundraising Event

Date Submitted: _____

Class/Club Requesting Fundraiser: _____

Class/Club Advisor (please print): _____

Fundraiser Contact: _____

Description of Fundraiser: _____

Purpose of Fundraiser: _____

Location of Fundraiser: _____

Fundraiser Start & End Dates: _____

Each Fundraising Request must be submitted with:

- Revenue Potential
- Class/Club minutes approving fundraiser
- Fundraiser Flyer/Poster
- Activities/Facilities Request (if location of fundraiser is on school grounds)

Check materials needed for Fundraising Event:

- ASB Room Sales (please provide list of selling schedule)
- Tickets
- Receipt book
- Case box
- Using funds from ASB Class/Club account to promote fundraiser
- Other (please list any other request)

Notes: _____

ASB APPROVAL

ASB Bookkeeper: _____

Date: _____

ASB Administrator: _____

Date: _____

ASB Officer: _____

Date: _____

ASB Advisor: _____

Date: _____

Denied: _____

Date: _____

LIVERMORE VALLEY JOINT UNIFIED SCHOOL DISTRICT

GRANADA HIGH SCHOOL

REVENUE POTENTIAL TEST

ACTIVITY _____

DATE _____

ADVISOR _____

CLUB _____

	EXPECTED	ACTUAL	DIFFERENCE
REVENUE			
SALES Quantity x Sales Price	\$	\$	\$
OTHER REVENUE			
Donations, Sale of Ads, etc.	\$	\$	\$
TOTAL REVENUE (A)	\$	\$	\$
EXPENSES			
PRODUCT COSTS			
Quantity x Cost (per invoice)	\$	\$	\$
OTHER COSTS			
Freight, Advertising, etc.	\$	\$	\$
TOTAL EXPENSES (B)	\$	\$	\$
MISCELLANEOUS COSTS			
Items Donated or Given as Prizes - Quantity x Cost	\$	\$	\$
Items Unsold Quantity x Cost	\$	\$	\$
TOTAL OTHER COSTS (C)	\$	\$	\$
TOTAL PROFIT (A - B - C)	\$	\$	\$