



STUDENT ACTIVITY / SCHOOL SITE FUNDRAISING REQUEST FORM

*Instructions: This form must be completed by the staff sponsor and approved by the Site Administrator **BEFORE** any merchandise is ordered, advertisements are made, or fundraising activities begin.*

SECTION 1: GENERAL INFORMATION

- **School Site / Department:** _____
- **Club / Organization / Sport Team:** _____
- **Staff Sponsor Name:** _____
- **Sponsor Email:** _____ **Phone/Ext:** _____
- **Designated Activity Fund Account Code:** _____

SECTION 2: FUNDRAISER DETAILS

- **Name / Description of Fundraiser:** _____
- **Type of Fundraiser:** ☐ Sale of Physical Merchandise (e.g., candy, apparel, popcorn) ☐ Event / Ticketed Activity (e.g., car wash, dance, tournament) ☐ Service / Donation Drive (e.g., penny drive, direct collection) ☐ Product Pre-orders (Catalog sales)
- **Vendor Name (if applicable):** _____
- **Proposed Start Date:** _____ **Proposed End Date:** _____
- **Purpose of Funds Raised (Be specific—e.g., student field trip to ABQ, club t-shirts):** _____

SECTION 3: NMPED & FEDERAL COMPLIANCE CHECKLIST

Sponsors must initial next to each item acknowledging understanding and compliance.

1. ☐ **24-Hour Deposit Rule (NM PSAB Supplement 7):** I certify that all money collected will be turned into the school secretary/bookkeeper for deposit into the designated account within 24 hours of receipt. No cash will be kept overnight in classrooms.
2. ☐ **No Direct Disbursements:** I understand that all collected money must be deposited entirely. I will not use cash collections to directly purchase supplies, pay vendors, or hand out prizes. All expenses must go through the formal Purchase Order (PO) process.
3. ☐ **USDA "Smart Snacks" Food Sales (6.12.5 NMAC):** Will food or beverages be sold to students on campus between midnight and 30 minutes after the end of the school day?
 - ☐ **NO** * ☐ **YES** — If yes, I certify that the items meet USDA Smart Snack standards, **OR** this represents one of the two allowable exempt fundraising days permitted this semester.
4. ☐ **Inventory Management:** For physical merchandise sales, I certify that I will maintain a rigorous *Inventory Reconciliation Log* tracking items ordered, sold, lost, and remaining, and that this log will accompany my final financial reconciliation.

SECTION 4: PROJECTED FINANCIAL BUDGET

- **A. Expected Gross Sales/Revenue:** \$ _____
- **B. Estimated Total Costs/Vendor Expenses:** \$ _____
- **C. Projected Net Profit (Subtract B from A):** \$ _____

SECTION 5: AUTHORIZATION AND SIGN-OFF

Staff Sponsor Sign-off: *By signing below, I agree to manage this fundraiser in strict accordance with Los Lunas Schools Business Office procedures and NMPED guidelines.*

- **Sponsor Signature:** _____ **Date:** _____

Site Administrator Review: *I have reviewed this request, verified it fits within our site's master calendar, and approve the activity.*

- ☐ **APPROVED** ☐ **DENIED**
- **Administrator Signature:** _____ **A** _____ **Date:** _____