

B H S Fundraiser Approval Form

REMEMBER...All Fundraisers in which students are involved MUST go into the ASB account.

Today's Date: _____

Time: _____

The _____ would like to get approval from ASB to run the
club/activity/sport/team
following fundraiser:

FUNDRAISER:

Date to Begin: _____

Date to End: _____

Advisor/Coach Signature:

President/Captain Signature:

Approved and Recorded by:

Activities Director: _____

ASB Vice President: _____

Funds raised will be put into the following account: Booster _____ ASB _____

Only fill out this portion if funds are going into the ASB Account

Vendor: _____

of Items : _____ Cost per item: _____

Other Fundraising Expenses: _____

Total Cost of Fund Raiser: _____

Total Sales Projected: _____

Total Profit Projected: _____

If you need any more purchase orders for this event, please make sure to get them to the Finance Office PRIOR to purchasing any items. Once your fundraiser is complete, we will need to fill out a form with the total profit from your fundraiser.

Name and E-mail of person requesting:

Name: _____ E-mail: _____