Cornell Cooperative Extension | Niagara County



Tool L-20

Request for Permission to Raise Funds in the Name of 4-H

Submit to the Cornell Cooperative Extension of Niagara at least 30 days prior to the proposed fundraising date.

Name of your club/group/program: permission to raise money for:		_, requests
(purpose for raising money)		
Items or services to be sold or provided: _		
By this company (person or company mak	king your items that will be sold if applic	able)
Anticipated/estimated amount to be raised		
Date(s) of fundraiser:		
Location of sale:		
We have planned these dates so they will fundraising effort.	not coincide with (nor detract from) a c	ounty-wide 4-H
IF APPLICABLE: Proposed printed materia are to be attached to this request form.	als (i.e. flyers) to be distributed in conn	ection with the sale
Tax does not need to be collected for door	r to door sales.	
Your signature below signifies that you have above information is correct to the best of		included and the
Requested by:	Date of request	
Phone #	Email	
For office use only; APPROVED BY:		(4-H Lead educator)
Approved on this date:		

Growing Minds, Growing Communities